

## **Documentation Guidelines Communication Disorders**

Ple	ase provide the following documentation:
	Documentation should be on a letterhead, dated and signed by a qualified professional or evaluator, e.g. identifying credentials with license number(s).
	The substantial limitation in a major life activity should be described.
	Recommendations of appropriate accommodations (e.g. extra time, frequent breaks).
	Documentation should reflect data collected within the past three years at the time of request for services.
	A diagnosis consistent with the most recent DSM/ICD.
	Evaluation/Assessment of the following diagnostic criteria is required and evaluation results should include:
	<ul> <li>Developmental history of the communication difficulties in early childhood, unless acquired later in life, in which the resulting event and disorder history should be documented.</li> </ul>
	<ul> <li>A summary of present symptoms which meet the criteria for diagnosis of a communication disorder.</li> </ul>
	• Treatments, medications, accommodations/auxiliary aids, services currently prescribed or in use.
	Objective (quantitative and qualitative) evidence that symptoms are associated with significant functional impairment in the academic setting. Suggested sources for evidence of academic functional impairment include the results of a comprehensive psycho-educational evaluation, speech/language evaluation, neurological report, physical evaluation report, and/or school records.