

Career and Student Success Services Medical Diagnosis Documentation Form

Guidelines for Documenting a Disability or Medical Condition

Information for licensed/medical professionals

Columbia College is committed to providing educational opportunities for all students and assisting them in making their college experience successful and positive. To receive reasonable accommodations, the following documentation must be provided by a qualified physician or other licensed professional in a field related to the disability or medical condition.

AS APPROPRIATE, THE DOCUMENTATION SHOULD INCLUDE:

- 1) Diagnostic statement identifying the condition, date of the current diagnostic evaluation, and the date of the original diagnosis. It is important to have the documentation on an official letterhead and signed by the diagnosing professional.
- 2) **Diagnostic criteria and or diagnostic test used**. This description should include the specific results of diagnostic procedures, diagnostic tests utilized, and when it was administered. Diagnostic methods used should be congruent with the disability or medical condition and current professional practices within the field. Informal or non-standardized evaluations should be described in enough detail that a professional colleague could understand their role and significance in the diagnostic process.
- 3) **Description of the functional impact of the condition.** The impact of the disability or medical condition on the students' educational experience must be documented and explicitly described. This can include the provision of specific results from the diagnostic procedures and/or documentation of the impact of the disability or medical condition in previous educational settings (i.e. previous, IEP, 504, or other formal accommodation plans). The condition will be evaluated based on the typical progression of the condition, its interaction with development across the life span, the presence or absence of significant events (since the date of the evaluation) that would impact functioning, and how the information applies to the current situation of the request for accommodations.
- 4) **Description of current treatments, medications, assistive devices/services.** A history of treatments, medications, assistive devices, accommodations and/or assistive services to include statements about the effectiveness in minimizing the impact of the condition. Significant and potential side effects that may impact physical, perceptual, mental, behavioral or cognitive performance should also be noted.
- 5) **Recommendations for accommodations**. Depending on the impact of the disability or medical condition on the individual, the statement should include suggestions or recommendations for academic and housing accommodations that can help to provide full access for the student.
- 6) Recommendations for Therapy/Emotional Support Animals. For animals to be designated as an emotional support animal, students are required to demonstrate that their animal is a reasonable accommodation for a physical, emotional, or mental health disability. A therapy/emotional support animal is prescribed to an individual with a disability by a healthcare or mental health professional. A therapy/emotional support animal may be incorporated into a treatment plan to assist in alleviating the symptoms of that individual's disability. Medical/licensed professionals should provide a copy of the treatment plan that has been established with the client, incorporating the goals and outcomes that will include the assistance of an emotional support animal.
- 7) **Service Animals**-Students who use service animals are asked to contact the Career and Student Success Services to register as a student with a disability. We do not require any documentation about the training or certification of a service animal; however, we do require proof that a service animal has the current vaccinations required by the state of South Carolina.

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CAREER & STUDENT SUCCESS SERVICES Medical Diagnosis Documentation Form



Student Name:			DOB:
La	ast	First	MI
requires documentation from	the treating clinical		hall due to a disability, Columbia College r familiar with the student's condition
Please indicate accommo	dation request(s):	☐ Academic Accommodations☐ Medical Single☐ Other	☐ Emotional Support Animal (ESA)
Diagnosis (Clinical/other dis	orders related to di	sability accommodations)	
Diagnostic Code DSM-5/ICD		,	
			_
·			_
Date of Diagnosis:		Date of Last Assessment:	
Please describe the type, se	everity, and frequer	ncy of symptoms related to this di	agnosis.
What specific reasonable	accommodations	would you recommend?	
The above accommodation			
☐ Medically Necessary	☐ Recommended	d to enhance the comfort and conv	venience of the student
If medically necessary, plea help the student achieve ed	•	accommodation(s) relate(s) to th	e impact of the condition and would

For Medical Single and/or Emotional Support Animal	requests only:	
Does the student's disability significantly limit any ma	jor life activities?	
	tails of limitations and how they relate to living in a residence hall.	
For Emotional Support Animal requests only: If not already explained earlier in the documentation, please	explain why having an ESA on campus would be necessary?	
ESA Specific Information: Type and Breed of Animal:	Approximate Age:	
Name of Animal:	Overall Health (check): Excellent Good Fair Poor	
Name and Title of Qualified Professional		
Name	Specialty	
License #	State of License	
Address	Phone	
	Fax	
Signed(Clinical Professional or Health Care Provider)	Dat <u>e</u>	

Questions? Contact:

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^{*}Evaluation report and/or documentation forms themselves do not automatically qualify student(s) for reasonable accommodations. Career and Student Success Services will make final decisions regarding accommodations and any other services they or CC may provide.