

## Documentation Guidelines For A Vision Condition

To receive accommodations or adjustments (alternative circumstances) for equal access and opportunity in a university setting students must arrange clinical documentation that sufficiently verifies and describes a disability situation. The purpose of documentation is to supply enough information for making effective decisions about the need to allow adjustments or accommodations. The information should be presented in such a way that a layman can understand it. It should also explain how the vision circumstance will substantially limit the student's ability to function in relation to specific things that need to be accomplished for courses: examples are dealing with assignments, taking notes, taking tests. It should be written by a licensed ophthalmologist, optometrist or equivalent specialist. There should be adequate information on all of the following topics. The paperwork should:

- a. Indicate the author's credentials qualify for diagnosis the vision condition.
- b. Summary the history/development of the vision condition.
- c. Provide an ocular assessment/evaluation.
- d. Assign an appropriate vision diagnoses.
- e. Describe the functional limitations of the condition, and indicate whether the degree of limitation is mild, moderate, or substantial.
- f. Describe how the limiting aspects will affect the student's academic functioning, and if applicable, how it will affect living in a residential hall (small rooms in an apartment building type of setting).
- g. Describe how the limiting effects are expected to change over time.
- h. Suggest how the functionally limiting manifestations of the visual condition should be appropriately accommodated.

**Concise** statements may be sufficient if they adequately address their respective topics. Please keep in mind that a diagnosis is not equivalent to a disability; a disability is the way a diagnosed condition limits a person's functioning. It's important to describe the limiting influences. Documentation that's primarily paperwork copied directly out of a patient's file rarely meets these guidelines (i.e., doesn't discuss limitations in a college setting). Similarly, documentation doesn't meet all the guidelines when it simply recommends how a student should be accommodated (i.e., doesn't adequately describe current clinical factors or explain how they'll limit the student). The idea is that documentation must provide adequate information to allow good decisions about why adjustments or accommodations will be necessary. Thus, the best form of documentation is probably the summary of a recent evaluation with a concise letter written specifically for this purpose.