

PSYCHIATRIC DISABILITY DOCUMENTATION GUIDELINES

Student Information *To be completed by the student*

Name:	Student ID:	
Email:	Phone:	
disability. To be eligible for accommodation	you understand the documentation requirements for establishing a psychiaton/s it is necessary to establish that you have a psychiatric disorder that cauctivities. It is also necessary to show how accommodations will directly he	ises
variable and not necessarily permanent, it is	s is not always obvious and the symptoms related to psychiatric disorders as important to show how a psychiatric disorder impacts your life. Generall levant in determining what accommodations you may need now. Please no I periodically.	y
the nature, frequency, and severity of symptoprovide a diagnosis, a developmental and ps	ns and reports by qualified professionals are usually necessary in establishing toms and limitations related to psychiatric disorders. Evaluations should sychiatric history, and an objective description of symptoms and limitation order does not necessarily establish a disability that requires accommodation	ns in
will review any information you feel is rele	alified professional is highly recommended, Disability Support Services (Exvant to demonstrating your need for accommodation. School records, ducation Plans (IEPs), 504 Plans, medical records, verification of prior mation can be helpful.	OSS)
documentation has been submitted and review	Il need to submit to DSS all supporting documentation. After your lewed, DSS will email your Lion account regarding the results. Please note our request within 15 business days once you have provided all of your	e that
recently evaluated you. If you are being trea	didelines before you share them with the qualified professional who most ated by more than one processional, it may be helpful to submit a report by a ffice at (310) 338-4216 if you have any questions.	y
I have read and understand the information	provided above.	
Signature:	Date:	

Psychiatric Disability Documentation Guidelines Licensed Professional Information

To be completed by the Licensed Professional

Name and Title of Licensed Professional:	
License Certification Number (Describe credentials):	
Business Address:	
Telephone Number:	
Signature:	

To the Licensed Professional: Based on a psychiatric disorder, your patient is requesting services through Loyola Marymount University's Disability Support Services (DSS) Office. To be eligible for services, this student must show that they have a psychiatric disorder that results in limitation/s in a major life activity.

Psychiatric disorders are not necessarily stable or permanent over time. For this reason, it is important that documentation addresses the student's current condition and how it impacts their studies or life on campus. Diagnosis alone, prescription notes, and brief letters generally do not provide enough information to establish a disability or plan for accommodation. Recommendations should be clearly supported by objective information from your evaluation procedures and/or the patient's history of impairment.

To assist this student, we ask that you respond to each of the five points below in a typed narrative report, signed and on letterhead. Complete documentation will enable the University to provide appropriate accommodation to the student in a timely manner.

- 1. A psychiatric history and clinical summary that includes the age of onset and alternative explanations for presenting problems. Include the current DSM-V or ICD-10 diagnosis.
- 2. The time frame in which you have treated this patient, including the most recent evaluation or treatment. Detail the nature, frequency, and severity of symptoms present at your last visit and how major life activities are limited. Specific, objective information beyond the patient's self-report is most helpful.
- 3. Current medication/s including dosage, side effects, and compliance along with other on-going therapeutic interventions.
- 4. The prognosis, which includes likelihood of improvement or deterioration and within what approximate time frame.
- 5. If specific recommendations are made, each should be directly connected to a demonstrated current functional limitation.

Thank you for your time in helping this student. Additionally, please feel free to add any verifying documentation from your files. If you have any questions, please call the DSS Office at (310) 338-4216.