ACQUIRED BRAIN INJURY (ABI)

Documentation Guidelines

The following guidelines are provided in the interest of assuring that the documentation is appropriate to establish the student as an individual with a disability and to provide a rationale for reasonable accommodations. These guidelines are consistent with the CSU Policy on Provision of Services to Students with Disabilities.

Acquired Brain Injury: External or internal trauma to the brain, before or after birth from environmental injury, alcohol or drug abuse, stroke, infections, tumors, or oxygen deprivation, which results in functional limitation in cognition (i.e., memory, language, attention and concentration, executive functions), mood, and motor coordination.

Verification of Acquired Brain Injury:
Documentation shall be provided by a verifying professional qualified to assess the nature and extent of ABI, such as a licensed physician, psychiatrist, neurologist, rehabilitation counselor, school psychologist, or clinical psychologist.

The letter or report should include:

- Reference to the injury and when it occurred.
- The nature of the functional limitations created by the injury (e.g. difficulty with language syntax, long term or short term memory, co-ordination and mobility).
  - A prognosis for change or improvement is desirable, but not essential.
- Hospital or discharge summary reports may be acceptable if they also include a clear description of the areas of the areas of functioning affected by the injury.
- Veterans who have a service related disability rating may submit a DD 214 form or similar as evidence of ABI in lieu of the above.

Assessment must be current. Since assessment constitutes the basis for determining reasonable accommodations, it is in a student's best interest to provide verification that reflects current level of functioning.

Type of Documentation:
You may submit a letter from your physician on letterhead stationery which addresses the areas above or may choose to use the Disability Verification Form.