

ATTENTION DEFICIT/HYPERACTIVITY DISORDER (ADHD)

The following information is provided to clarify the process for test takers submitting a test accommodation(s) request based on Attention Deficit/Hyperactivity Disorder (ADHD).

1. **The evaluation must be conducted by a qualified evaluator.** Professionals rendering a diagnosis of ADHD must be qualified to do so. Comprehensive training in the differential diagnosis of ADHD and other psychiatric disorders and direct experience and treatment of adults is necessary. The evaluator's name, title, and professional credentials including license and certification information as well as area of specialization, employment, and the state in which the professional evaluator practices must be included in the documentation. All reports must be typed on official letterhead, dated, and signed by the evaluator. The evaluator should be an impartial professional who is not a family member of the test taker.
2. **The testing/assessment must be current.** The determination of whether or not an individual who plans to take the GMAT exam is entitled to accommodations must be based on a current assessment of the impairment and the impact of that impairment on the individual's ability to take the GMAT exam under standard conditions. As some conditions can change over time, documentation for the impairment should be current, preferably within the last three years.
3. **Documentation should be comprehensive.** Because ADHD is, by definition, first exhibited in childhood (although it may not have been formally diagnosed at that time) and displayed in more than one setting, objective, relevant, historical information is essential. Information verifying a chronic course of ADHD symptoms from childhood through adolescence to adulthood should be submitted as part of the request for test accommodations. This information should include, but is not necessarily limited to, educational transcripts, report cards, teacher/professor comments, tutoring evaluations, job assessments, etc. **In addition:**
 - A. The evaluator is expected to review, document, and discuss DSM-IV diagnostic criteria for ADHD and describe the extent to which the test taker meets these criteria. The report must include information about the specific symptoms exhibited and must document that the test taker meets criteria for long-standing history, impairment, and pervasiveness.
 - B. A history of the test taker's presenting symptoms must be provided, including evidence of ongoing impulsive/hyperactive or inattentive behaviors (as specified in the DSM-IV) that significantly impair functioning in two or more settings.
 - C. The information collected and reported by the evaluator must consist of more than a self-report from the test taker. Information from third-party sources is critical in the diagnosis of adult ADHD. Information gathered in the diagnostic interview and reported in the evaluation should include, but is not necessarily limited to, the following:
 - History of presenting attentional symptoms, including evidence of ongoing impulsive/hyperactive or inattentive behavior that have significantly impaired functioning over time and across multiple settings
 - Developmental history
 - Family history, for presence of ADHD and other educational, learning, physical, or psychological difficulties

deemed relevant by the evaluator

- Relevant medical and medication history, including the reason behind the absence of a medical basis for the symptoms being evaluated, if applicable
- Relevant psycho-social history and any relevant interventions
- A thorough academic history of elementary, secondary, and postsecondary education
- Review of psycho-educational test reports to determine if a pattern of strengths or weaknesses supports a diagnosis of attention or learning problems.
- Evidence of impairment in several life settings (home, school, work, etc.), and evidence that the disorder significantly restricts one or more major life activities
- Relevant employment history (i.e., evidence of impairment in the workplace)
- Description of current functional limitations relative to an educational setting and to the GMAT exam in particular, which are presumably a direct result of the described problems in attention
- Discussion of the differential diagnosis, including alternative or coexisting mood, behavioral, neurological, and/or personality disorders that may confound the diagnosis of ADHD
- Exploration of possible alternative diagnoses that may mimic ADHD
- Explanation of the intensity and frequency of the symptoms and whether these behaviors constitute an impairment in a major life activity

4. Relevant assessment behavior information should be provided if appropriate. A neuropsychological or psycho-educational assessment may be necessary in order to determine the test taker’s pattern of strengths and weaknesses and to determine whether there are patterns supportive of attention problems. Scores from subtests on the latest version of the Wechsler Adult Intelligence Scale, memory function tests, attention or tracking tests, or continuous performance tests, do not in and of themselves establish the presence or absence of ADHD. They may, however, be useful as one part of the diagnostic process. Checklists and/or surveys can serve to supplement the diagnostic profile but by themselves are not adequate for the diagnosis of ADHD. When testing is used, standard scores must be provided for all normed measures.

A summary of assessment procedures and evaluation instruments used to make the diagnosis, including evaluation results and standardized scores, if applicable, must be provided. When possible, medical information relating to the individual should include the impact of medication on the individual’s ability to take the GMAT exam under standard testing conditions.

5. DSM-IV criteria must be identified. A diagnostic report must include a review of DSM-IV criteria for ADHD both currently and retrospectively and must specify which symptoms are present (please see DSM-IV for specific criteria). According to the DSM-IV, “the essential feature of ADHD is a persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequent and severe than is typically observed in individuals at a comparable level of development.” Other criteria include the following:

- Symptoms of hyperactivity-impulsivity or inattention that were present in childhood
- Current symptoms that have been present for at least six months
- Impairment from the symptoms present in two or more settings (school, work, home)

6. Documentation must include a specific diagnosis. The report must include a specific diagnosis of ADHD based on the DSM-IV diagnostic criteria. Individuals who report problems with organization, test anxiety, memory, and concentration on only a situational basis do not fit the prescribed diagnostic criteria for ADHD. Given that many individuals benefit from prescribed medications and therapies, a positive response to medication is not by itself supportive

of a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodation.

7. A clinical summary must be provided. A written diagnostic summary based on a comprehensive evaluative process is a necessary component of the assessment. The clinical summary must include each of the following:

- Demonstration that the evaluator has ruled out alternative explanations for inattentiveness, impulsivity, and/or hyperactivity as a result of psychological or medical disorders or non-cognitive factors
- Indication of how patterns of inattentiveness, impulsivity, and/or hyperactivity across the life span and across settings are used to determine the presence of ADHD
- Indication of the functional limitations resulting from the ADHD and the degree to which it affects the individual in the context for which accommodations are being requested (i.e., impact on the GMAT exam)
- Indication as to why specific accommodations are needed and how the effects of ADHD symptoms, as designated by the DSM-IV, are mitigated by the requested accommodation(s)
- Indication of the intensity and frequency of the symptoms and whether these behaviors constitute an impairment in a major life activity (needed because of the challenge of distinguishing ADHD from normal developmental patterns and behaviors of adults, including procrastination, disorganization, distractibility, restlessness, boredom, academic underachievement or failure, low self-esteem, and chronic tardiness or lack of attention)

8. The evaluator must recommend specific accommodations, and each one must include a rationale. The evaluator must describe the impact of the ADHD (if one exists) on a specific major life activity as well as the degree of significance of this impact on the individual. The diagnostic report must include specific recommendations for accommodations(s). An explanation must be provided as to why each accommodation is recommended and should be correlated with specific identified functional limitations. Documentation should validate the need for accommodation based on the test taker's current level of functioning. The documentation should include any record of prior accommodation or auxiliary aid, including information about specific conditions under which the accommodation was used (e.g., other standardized tests or final exams). Please note: A prior history of accommodations(s) does not, in itself, without demonstration of a current need, warrant the provision of a similar accommodation for the GMAT exam. If no prior accommodation has been provided, the evaluator and test taker should include a detailed explanation as to why no accommodation was used in the past and why accommodation is needed at this time.

APPLICATION PACKET CHECKLIST

From the test taker:

- Completed GMAT Test Accommodation Request Form
- Test fee (see *Bulletin* at mba.com)

From the qualified, non-family evaluator:

- Current, comprehensive assessment of the impairment on official letterhead
- Documentation substantiating ADHD with a review of DSM-IV criteria
- Relevant assessment information, if appropriate
- A specific diagnosis
- Clinical summary
- Specific accommodation recommendations