

**CONFIDENTIAL NEUROPSYCHOLOGICAL and  
PSYCHOEDUCATIONAL SCREENING EVALUATION**

**Name:** xxxxxxxxxxxx  
**Date of Birth:** xxxxxxxxxxxx  
**Age:** xxxxxxxxxxxxxxxx  
**Gender:** xxxxxx  
**School:** xxxxxxxxxxxxxxxx

**Report Date:** xxxxxxxxxxxx  
**Examiner:** Scott Andrews, Ph.D  
**Test Site:** PTC  
**Evaluation Start Date:** xxxxxxxxxxxx  
**Grade:** xxxxxxxxxxxx

**Reason for Referral:**

Ms. Xxxxxx Xxxxxxxx, Xxxxxx's individual therapist, referred Xxxxxx to Psychological Testing Consultants for neuropsychological and psychoeducational testing. The reasons for referral include \*\*\*\*\*  
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**The purpose of this evaluation is to screen for possible learning disorders and neurocognitive vulnerabilities, to gain a better understanding of Xxxxxx's school adjustment and academic challenges, and to provide special education and behavioral health case management recommendations as may be appropriate.**

**Evaluation Procedures:**

- Child Behavior Checklist (Informants: mother and father)
- Child History Form
- Conners' Self Rating Scale (Informants: mother, father, and Science Teacher)
- NEPSY: Second Edition (A Developmental Neuropsychological Assessment)
- Personality Assessment Inventory
- Teacher Report Form (Informant: Science Teacher)
- Timberlawn Child Functioning Scale (Informants: mother, father, and Science Teacher)
- Wechsler Intelligence Scale for Children—Fourth Edition (WISC-IV)
- Wechsler Individual Achievement Test—Second Edition (WIAT-II)
- Youth Self Report Inventory

**Clinical Observations and Evaluations:**

Diagnostic Interview, PTC: \*\*\*\*\*

**Relevant Background Information:**

The patient is a \*\*\*\*\* who is presently living with her \*\*\*\*\*.  
She is attending \*\*\*\*\* and will be entering her \*\*\*\*\* year.  
XXXXXX and her \*\*\*\*\* provided the history.

**Prenatal, Natal, and Perinatal History:**

According to XXXXXXXXXXXXXXX, her pregnancy with XXXXXX was uncomplicated and she was born two weeks early by C-section. She was reported to be healthy and vigorous at birth. XXXXXX was 6lbs., 12oz., and her APGAR scores were normal.

**Early Development:**

There were no early developmental problems reported and her speech and motor milestones may have been somewhat early. XXXXXXXXXXXXXXX described XXXXXX as a happy active baby who ate well and slept well.

**Medical History:**

XXXXXX had a XXXXXXXXXXX and had an XXXXXXXXXXX at age 3. There is no history of prolonged high core body temperatures, seizures, head injuries, or poisonings. She has no history of sensitivity in any sensory areas. She has no known allergies but she may be allergic to XXXXXXX. She also XXXXXXX her foot. XXXXXX is currently prescribed XXXXXXX 10 mg. qam to treat her attentional difficulties.

The family history is positive for XXX. There is also a XXXXXXX on her mother's side of the family who has been diagnosed with "severe XXXXX." There is no family history of depression but XXXXXXXXXXXXXXX reported that she has ADHD and that XXXXXX's maternal aunt has XXXXXXX. Also, XXXXXX's maternal grandmother and aunt have a history of XXXXXXXXXXX.

**Academic History:**

XXXXXX attended preschool in XXXXXXX four days a week. Difficulties focusing became evident in the 2<sup>nd</sup> grade as teachers reported that XXXXXX had difficulty focusing and sitting still. She was evaluated and results indicated ADHD, however she was not found to have any learning disabilities. XXXXXX was reported to be an excellent student with good behavior throughout elementary school and middle school.

XXXXXX reports that she currently struggles with XXXXXXXXXXX and XXXXXXX in school. She has "always been \*\*\*\*\*". Her organizational skills are reported to be poor and she carries a diagnosis of ADHD and is on medication. XXXXXXXXXXXXXXX reported that she has noticed \*\*\*\*\*  
XXXXXX describes herself as being a \*\*\*\*\*.  
Many of her teachers have indicated that XXXXXX does not seem to be \*\*\*\*\*.  
She acknowledged that she often loses track of materials needed for school work and

tends to be disorganized overall. Also, XXXXXXXXXXXXXXX reported that she started to notice some \*\*\*\*\*.

**Social and Emotional History:**

XXXXXX started in counseling with XXXXXXXXXXXXXXX in XXXXXXX of 2009 after a period of XXXXXXXXXXXXXXX. XXXXXXX had given up XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX. She reports that she has trouble falling asleep and tends to be up late at night. Her appetite is good and her weight has been stable. She describes herself as a generally happy person with several good friends. She has good energy and a well-developed set of hobbies and interests including XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX. XXXXXXX reports that she enjoys her hobbies and interests.

There has been a substantial history of family stress, XXXXXXXXXXXXXXX was diagnosed with XXXXXXX in XXXXXXX and has been treated successfully. Also it has been described as stressful having XXXXXXXXXXXXXXX'sXXXXXXXXXXXXXXXXXXXXXXXXXXXX. Also, XXXXXXX had a sister XXX.

**Observations:**

XXXXXX is an English speaking, xx-year-old female, with a right hand preference. She was taking no medication on the day of neuropsychological testing but resumed taking her XXXXXXX 10 mg. qam on the days of cognitive and personality testing. She has no known visual, auditory, or motor disabilities. XXXXXXX's attitude toward the testing was open and cooperative. Rapport was quickly established with XXXXXXX and she appeared interested and motivated. Her work style was alert, relaxed and persistent. However, XXXXXXX did display some impulsivity on several items of the Block Design subtest of the WISC-IV. At these times, she indicated to the examiner that she had finished the item before adequately checking her work for accuracy. She later recognized the error and was able to self-correct. There were also signs of processing difficulty on the *Math Reasoning* subtest of the WIAT-II including slow speed, distractibility and motor restlessness. Nevertheless, XXXXXXX was able to remain on task and focus well on the majority of test items. Overall the conditions for testing were positive and the test results can be considered reliable and valid estimates of her current level of functioning.

**Test Results:**

**Cognitive Testing**

To assess XXXXXXX's ability to reason and to solve problems, verbally and nonverbally, the Wechsler Intelligence Scale for Children: Fourth Edition (WISC-IV) was administered.

***WISC IV***

**Composite Scores Summary**

Scale	Sum of Scaled Scores	Composite Score	Percentile Rank	95% Confidence Interval	Qualitative Description
Verbal Comprehension (VCI)	36	110	75	103-116	High Average
Perceptual Reasoning (PRI)	31	102	55	94-109	Average
Working Memory (WMI)	18	94	34	87-102	Average

Processing Speed (PSI)	23	109	73	99-117	Average
Full Scale (FSIQ)	108	106	66	101-111	Average

**Verbal Comprehension Subtest Scores Summary**

Subtests	Raw Score	Scaled Score	Test Age Equiv.	Percentile Rank
Similarities	31	11	>16:10	63
Vocabulary	50	12	>16:10	75
Comprehension	35	13	>16:10	84

**Perceptual Reasoning Subtest Scores Summary**

Subtests	Raw Score	Scaled Score	Test Age Equiv.	Percentile Rank
Block Design	42	8	12:6	25
Picture Concepts	23	13	>16:10	84
Matrix Reasoning	25	10	14:6	50

**Working Memory Subtest Scores Summary**

Subtests	Raw Score	Scaled Score	Test Age Equiv.	Percentile Rank
Digit Span	16	8	10:10	25
Letter-Number Sequencing	20	10	15:10	50

**Processing Speed Subtest Scores Summary**

Subtests	Raw Score	Scaled Score	Test Age Equiv.	Percentile Rank
Coding	69	10	15:6	50
Symbol Search	40	13	>16:10	84

**Composite Score Differences**

Discrepancy Comparisons	Scaled Score 1	Scaled Score 2	Diff.	Critical Value	Sig. Diff. Y/N	Base Rate
VCI - PRI	110	102	8	10.59	N	25.8%
VCI - WMI	110	94	16	10.59	Y	12.6%
VCI - PSI	110	109	1	11.38	N	47.2%
PRI - WMI	102	94	8	11.75	N	31.2%
PRI - PSI	102	109	-7	12.46	N	31.7%
WMI - PSI	94	109	-15	12.46	Y	19.8%

Base Rate by Overall Sample  
 Statistical Significance (Critical Values) at the .05 level

**Subtest Score Differences**

Discrepancy Comparisons	Scaled Score 1	Scaled Score 2	Diff.	Critical Value	Sig. Diff. Y/N	Base Rate
Digit Span - Letter-Number Sequencing	8	10	-2	2.83	N	32.5%
Coding - Symbol Search	10	13	-3	3.55	N	19.1%
Similarities - Picture Concepts	11	13	-2	3.36	N	32.4%

Statistical Significance (Critical Values) at the .05 level

**Differences between Subtest and Mean of Subtest Scores**

Subtest	Subtest Scaled Score	Mean Scaled Score	Diff. from Mean	Critical Value	S/W	Base Rate
Block Design	8	10.8	-2.80	3.01		10-25%
Similarities	11	10.8	0.20	3.01		>25%
Digit Span	8	10.8	-2.80	2.87		10-25%
Picture Concepts	13	10.8	2.20	3.39		>25%
Coding	10	10.8	-0.80	3.17		>25%
Vocabulary	12	10.8	1.20	2.70		>25%
Letter-Number Sequencing	10	10.8	-0.80	2.63		>25%
Matrix Reasoning	10	10.8	-0.80	2.68		>25%
Comprehension	13	10.8	2.20	3.44		>25%
Symbol Search	13	10.8	2.20	3.56		>25%

Overall: Mean = 10.8, Scatter = 5, Base Rate = 90.3%  
 Statistical Significance (Critical Values) at the .05 level

**Process Summary and Discrepancy Analysis**

Process Score	Raw Score	Scaled Score
Digit Span Forward	8	7
Digit Span Backward	8	10

Process Score	Raw Score	Base Rate
Longest Digit Span Forward (LDSF)	5	96.5%
Longest Digit Span Backward (LDSB)	4	82%

**Process Discrepancy Comparisons**

Process Score	Raw Score 1	Raw Score 2	Difference	Base Rate
LDSF - LDSB	5	4	1	87.8%

Base Rate by All Ages

Subtest/Process Score	Scaled Score 1	Scaled Score 2	Diff.	Critical Value	Sig. Diff. Y/N	Base Rate
Digit Span Forward - Digit Span Backward	7	10	-3.00	3.62	N	22.0%

Statistical Significance (Critical Values) at the .05 level

Summary of Test Results:

On the WISC-IV, Composite Score standard scores of 91-109 are considered average, and scaled scores of 8 to 12 (25<sup>th</sup> to 75<sup>th</sup> percentiles) are considered average for the individual tasks.

The WISC-IV results show that Xxxxxx reasons in the High Average range with the use of language, with a Verbal Comprehension Composite Score standard score of 110 (75<sup>th</sup> percentile). She functions in the Average range on nonverbal tasks (Perceptual

Reasoning Composite Score standard score = 102, 55<sup>th</sup> percentile). XXXXXX achieved a score in the Average range of functioning for her overall intellectual level (Full Scale I.Q. Composite Score standard score = 106, 66<sup>th</sup> percentile).

In the Verbal Comprehension domain, XXXXXX's strongest performance was on the *Comprehension* task, which evaluated her understanding of appropriate judgment and behavior for social situations. Here, XXXXXX's score was in the High Average range (scaled score = 13, 84<sup>th</sup> percentile). On the *Similarities* task, she demonstrated Average ability to conceptualize and generalize using language (scaled score = 11, 63<sup>rd</sup> percentile). Next, XXXXXX completed a *Vocabulary* task that required her to orally define words. On this task she received a score in the upper end of the average range (scaled score = 12, 75<sup>th</sup> percentile).

In the area of Perceptual Reasoning, XXXXXX demonstrated High Average ability to think in terms of categories in order to sort pictures of common objects (*Picture Concepts* scaled score = 13, 84<sup>th</sup> percentile). On the *Matrix Reasoning* task, XXXXXX showed Average ability to reason with purely abstract visual information (scaled score = 10, 50<sup>th</sup> percentile). Next, XXXXXX demonstrated Average ability to analyze visual spatial material (*Block Design* scaled score = 8, 25<sup>th</sup> percentile). Here, geometric designs are presented using a picture, and she recreated the designs using blocks.

XXXXXX demonstrated Average Working Memory abilities (Working Memory Composite Score standard score = 94, 34<sup>th</sup> percentile). Her score on the *Digit Span* task was in the lower end of the Average range (scaled score = 8, 25<sup>th</sup> percentile). The *Digit Span* task is divided into the Digits Forward and the Digits Backward tasks, and here, XXXXXX performed in the Low Average range on *Digit Span* Forward (scaled score = 7, 16<sup>th</sup> percentile) and in the Average range on *Digit Span* Backward (scaled score = 10, 50<sup>th</sup> percentile). Similarly, XXXXXX was able to hold complex auditory information in her mind and manipulate it without difficulty (*Letter-Number Sequencing* scaled score = 10, 50<sup>th</sup> percentile). Here, she was asked to listen to and rearrange series of letters and numbers, placing the numbers first.

In the area of Processing Speed, XXXXXX earned a score placing within the Average range (Composite Score standard score = 109, 73<sup>rd</sup> percentile). XXXXXX earned a score in the High Average range on a task that assessed her ability to copy symbols in a time efficient manner (*Coding* scaled score = 13, 84<sup>th</sup> percentile). On another Processing Speed task, that required XXXXXX to scan symbols and mark symbols that were the same as a target symbol, XXXXXX earned a score that places within the average range (*Symbol Search* scaled score = 10, 50<sup>th</sup> percentile). The latter task involves less motor output than the former task.

The Composite Score Differences analysis table shows that XXXXXX's Working Memory Composite Score is lower, to a statistically significant degree, than her Verbal Comprehension and Processing Speed Composite Scores **indicating a relative weakness in the area of short term memory, specifically in retaining rote information.**

**Achievement Testing**

In order to determine Xxxxxx's current level of achievement in several academic subjects, the Wechsler Individual Achievement Test: Second Edition (WIAT-II) was administered.

**WIAT-II**

**Summary of WIAT-II Subtest Scores**

SUBTESTS*	RAW	STD	95% INTERVAL	PR	NCE	S9	AGE EQU	GRADE EQU
Word Reading	115	95	88- 102	37	43	4	13:8	8:5
Reading Comprehension	213**	121	112- 130	92	79	8	>19:11	>12:9
Pseudoword Decoding	37	86	80- 92	18	30	3	10:8	4:5
Numerical Operations	49	120	111- 129	91	78	8	>19:11	>12:9
Math Reasoning	53	95	85- 105	37	43	4	13:8	8:4
Spelling	42	105	95- 115	63	57	6	17:0- 19:11	10:4
Written Expression	39	122	111- 133	93	81	8	>19:11	>12:9
Listening Comprehension	34	104	91- 117	61	56	6	16:0	10:4

\* WIAT-II age-based normative information was used in the calculation of subtest and composite scores.

\*\* Represents Reading Comprehension weighted raw score.

**Summary of WIAT-II Composite and Total Scores**

COMPOSITES*	RAW	STD	95% INTERVAL	PR	NCE	S9
Reading	302	98	93- 103	45	47	5
Mathematics	215	108	101- 115	70	61	6
Written Language	227	115	107- 123	84	71	7

\* WIAT-II age-based normative information was used in the calculation of subtest and composite scores

**Differences Between Composite Standard Scores**

COMPOSITES	DIFFERENCE	SIGNIF.	FREQUENCY
Reading/Mathematics	-10	.05*	24.1%
Reading/Written Language	-17	.05*	5.5%
Mathematics/Written Language	-7	ns	30%

\* Significant at the .05 level

**Ability-Achievement Discrepancy Analysis**

Date of Ability Testing: 8/13/2009

Ability Score Type: FSIQ

Ability Score: 106

**Predicted-Difference Method**

	Predicted Score	Actual Score	Expected Diff.	Critical Value	Sig. Diff. Y/N	Base Rate

WIAT-II SUBTEST						
<b>Word Reading</b>	104	95	9	7.01	Y	20%
Reading Comprehension	105	121	-16	7.63	Y	
<b>Pseudoword Decoding</b>	104	86	18	6.02	Y	5-10%
Numerical Operations	104	120	-16	8.54	Y	
<b>Math Reasoning</b>	105	95	10	8.76	Y	15%
Spelling	104	105	-1	8.51	N	
Written Expression	104	122	-18	11.63	Y	
Listening Comprehension	105	104	1	13.45	N	>25%
COMPOSITES						
<b>Reading</b>	105	98	7	5.82	Y	25%
Mathematics	105	108	-3	7.07	N	
Written Language	105	115	-10	10.91	N	

Statistical Significance (Critical Values) at the .05 level

Base Rates are not reported when the achievement score equals or exceeds the ability score.

Summary of Test Results:

On the WIAT-II, standard scores of 90-110 are considered average. To assess Reading, the *Word Reading* test of the WIAT-II was administered, and here Xxxxxx was asked to read isolated words, including sight words. Although her score was Average (standard score = 95, 37<sup>th</sup> percentile) it was lower than predicted when compared to her Full Scale IQ score of 106 (Predicted Score standard score = 104). On the *Pseudoword Decoding* task, no sight words are included. Here, Xxxxxx used decoding skills to read nonsense words such as “pon” (standard score = 86, 18<sup>th</sup> percentile). Her score was in the Low Average range and again significantly lower than her Predicted Score of 104. This finding **suggests that decoding is an area of weakness for Xxxxxx**. For the *Reading Comprehension* test, Xxxxxx was asked to read several passages silently and some sentences aloud, and was then asked questions about each. Xxxxxx earned a standard score of 121 (92<sup>nd</sup> percentile) on this task. This score was higher than expected given her global intellectual capacity **indicating that reading comprehension is an area of strength for Xxxxxx**.

In the Written Language domain, Xxxxxx was asked to spell words from dictation (*Spelling* standard score = 105, 63<sup>rd</sup> percentile). Her score indicates adequately developed spelling skills. On the last task of Written Language, Xxxxxx wrote a letter to the editor, stating her position either for or against required physical education classes in school. Xxxxxx received a score that falls in the Superior range on the *Written Expression* task (standard score = 122, 93<sup>rd</sup> percentile).

In the Oral Language domain, Xxxxxx was administered a *Listening Comprehension* subtest. She earned a score that places within the average range (standard score = 104, 61<sup>st</sup> percentile), which is commensurate with her Full Scale IQ score.

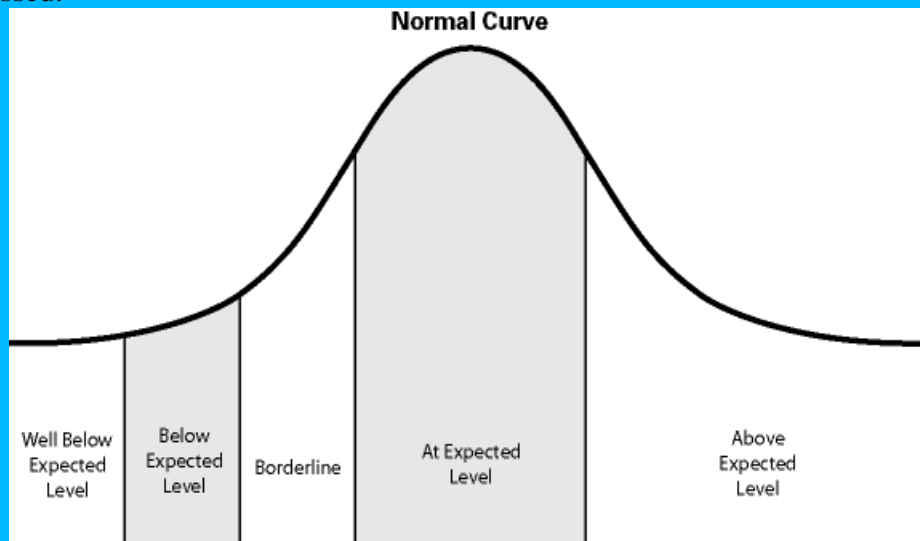
Xxxxxx next completed math problems using pencil and paper (*Numerical Operations*, standard score = 120, 91<sup>st</sup> percentile). Her score was commensurate with her global intellectual capacity. However, on the *Math Reasoning* test of the WIAT-II, Xxxxxx’s achieved a standard score of 95 (37<sup>th</sup> percentile) that was significantly below her predicted score of 105, indicating an area of relative weakness. On this task, she was asked to read charts and graphs and to solve word problems.

The Ability /Achievement Discrepancy Analysis (see table, above) compares XXXXX's achievement scores with her Predicted Score to determine if there are discrepancies in her achievement. Her achievement score in *Word Reading* (standard score = 95, 37<sup>th</sup> percentile), *Pseudoword Decoding* (standard score = 86, 75<sup>th</sup> percentile), and *Math Reasoning* (standard score = 95, 37<sup>th</sup> percentile) are lower than her Predicted Scores ranging from 104 – 105, **suggesting that word reading, decoding, and math reasoning are relative weaknesses for XXXXX and that learning disabilities in these areas are possible.** By contrast, XXXXX's performance in the areas of *Numerical Operations*, (Standard Score = 120, 91<sup>st</sup> percentile), *Spelling* (Standard Score = 105, 63<sup>rd</sup> percentile), *Reading Comprehension* (Standard Score = 121, 92<sup>nd</sup> percentile), *Written Expression* (Standard Score = 122, 93<sup>rd</sup> percentile), and *Listening Comprehension* (Standard Score = 104, 61<sup>st</sup> percentile) are generally consistent with her Predicted Scores (standard scores ranging from 104 to 105).

**Neuropsychological Testing**

XXXXX was administered the NEPSY-II to evaluate her neuropsychological functioning. The NEPSY-II helps assess academic, social, and behavioral difficulties in children and adolescents. Results obtained from a NEPSY-II assessment can be used to diagnose and aid in intervention planning for a variety of childhood disorders. In particular, a comprehensive understanding of an individual's cognitive limitations can facilitate the development of appropriate Individual Education Plans (IEP's) and guide placement and intervention decisions.

To evaluate XXXXX's performance on the NEPSY-II, review both the Classification Description Table, and the Normal Curve Graph below. These tools will serve as a guide to help you obtain a general understanding of XXXXX's performance on the assessment. Below the Classification Description Table is a description of each domain XXXXX was evaluated on. Next to this is a summary of how XXXXX performed on the domains that were assessed.



<b>Classification Description Table</b>	
<b>Classification</b>	<b>Description</b>
<b>Above Expected Level</b>	Children whose scores fall within this range have skills that are more developed than 75% of their peers.
<b>At Expected Level</b>	Children whose scores fall within this range have skills that are equal to 50% of their peers.
<b>Borderline</b>	Children whose scores fall within this range have skills that are not as developed as 75% of their peers.
<b>Below Expected Level</b>	Children whose scores fall within this range have skills that are not as developed as 90% of their peers.
<b>Well Below Expected Level</b>	Children whose scores fall within this range have skills that are not as developed as 98% of their peers.

<b>Summary of Results</b>		
<b>Domain</b>	<b>Description</b>	<b>Result</b>
<b>Attention and Executive Functioning</b>	These tests measure how well a child can plan, organize, change, and control behavior.	Xxxxxx's performance in this domain fell between the Borderline range and At Expected Level.
<b>Language</b>	These tests measure how well a child understands and uses words and sentences to communicate with others.	Xxxxxx's performance in this domain fell between the Borderline range and At Expected Level.
<b>Memory and Learning</b>	These tests measure how a child takes in, stores, and remembers information.	Xxxxxx's performance in this domain fell between the At Expected Level and Above Expected Level.
<b>Sensorimotor</b>	These tests measure how well a child can control hand movements.	Xxxxxx was not assessed in this domain.
<b>Social Perception</b>	These tests measure how well a child understands other people's feelings and thoughts.	Xxxxxx's performance in this domain fell At Expected Level
<b>Visuospatial Processing</b>	These tests measure how well a child sees and arranges visual information.	Xxxxxx's performance in this domain fell at the At Expected Level.

<b>Attention and Executive Functioning</b>					
<b>Score Name</b>	<b>Raw Scores</b>	<b>Scaled Scores</b>	<b>Percentile Ranks (%)</b>	<b>Cumulative Percentages (%)</b>	<b>Classification</b>
Auditory Attention Total Correct	30	--	51-75	--	At Expected Level
Auditory Attention Combined Scaled Score	--	12	75	--	At Expected Level
Auditory Attention Total Omission Errors	0	--	51-75	--	At Expected Level
Auditory Attention Total Commission Errors	0	--	26-50	--	At Expected Level
Auditory Attention Total Inhibitory Errors	0	--	26-50	--	At Expected Level
Response Set Total Correct	35	--	51-75	--	At Expected Level
Response Set Combined Scaled Score	--	12	75	--	At Expected Level
Response Set Total Omission Errors	1	--	51-75	--	At Expected Level
Response Set Total Commission Errors	0	--	>75	--	Above Expected Level
Response Set Total Inhibitory Errors	0	--	>75	--	Above Expected Level
AA vs. RS Contrast Scaled Score	--	11	63	--	At Expected Level
Clocks Total Score	70	9	37	--	At Expected Level



**Percentile Ranks**

Score Name	<2	2-10	11-25	26-75	>75
Auditory Attention Total Correct				+	
Auditory Attention Total Omission Errors				+	
Auditory Attention Total Commission Errors				+	
Auditory Attention Total Inhibitory Errors				+	
Response Set Total Correct				+	
Response Set Total Omission Errors				+	
Response Set Total Commission Errors					+
Response Set Total Inhibitory Errors					+
Inhibition-Naming Total Errors				+	
Inhibition-Naming Total Self-Corrected Errors				+	
Inhibition-Naming Total Uncorrected Errors				+	
Inhibition-Inhibition Total Errors			+		
Inhibition-Inhibition Total Self-Corrected Errors				+	
Inhibition-Inhibition Total Uncorrected Errors			+		
Inhibition-Switching Total Errors				+	
Inhibition-Switching Total Self-Corrected Errors				+	
Inhibition-Switching Total Uncorrected Errors				+	

**Language**

Score Name	Raw Scores	Scaled Scores	Percentile Ranks (%)	Classification
Comprehension of Instructions Total Score	27	7	16	Borderline
Speeded Naming Total Completion Time	39	8	25	At Expected Level
Speeded Naming Total Correct	75	--	51-75	At Expected Level
Speeded Naming Combined Scaled Score	--	9	37	At Expected Level
Speeded Naming Total Self-Corrected Errors	0	--	51-75	At Expected Level
Word Generation-Semantic Total Score	43	12	75	At Expected Level
Word Generation-Initial Letter Total Score	29	11	63	At Expected Level
WG Semantic vs. Initial Letter Contrast Scaled Score	--	10	50	At Expected Level

**Scaled Scores**

Score Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Comprehension of Instructions Total Score							+												
Speeded Naming Total Completion Time								+											
Speeded Naming Combined Scaled Score									+										
Word Generation-Semantic Total Score												+							
Word Generation-Initial Letter Total Score											+								

**Percentile Ranks**

Score Name	<2	2-10	11-25	26-75	>75
Speeded Naming Total Correct				+	





Comprehension of Instructions			
Asks for Repetition Total	0	26-75	--

**Memory and Learning**

	Raw Score	Cumulative Percentages (%)	Percent of Normative Sample (%)
Memory for Designs and Memory for Designs Delayed			
Rule Violation Total	1	26-75	--
Memory for Faces and Memory for Faces Delayed			
Spontaneous Comments Total	0	26-75	--
Word List Interference			
Asks for Repetition Total	0	26-75	--

Summary of Test Results:

On the NEPSY II, scaled scores of 8 to 12 and standard scores of 90 - 110 are average (25<sup>th</sup> to 75<sup>th</sup> percentile). The neurological skills evaluated in the Attention and Executive Functioning domain include persistence, the ability to inhibit impulsive responding, auditory and visual attention, planning ability, the ability to adopt, maintain, and change set, and the ability to inhibit the impulse to respond when confronted with conflicting stimuli. On the first part of the Auditory Attention and Response Set task, Xxxxxx's simple auditory attention was in the upper end of the At Expected Level range for her age (*Auditory Attention* Combined scaled score = 12, 75th percentile). Here, she was asked to listen to a long list of words played on a CD, and touch colored circles on a page when she heard target words. On the second part of this task, the complex auditory attention part of the task, she was asked to switch sets, i.e., touch a red shape when she heard the word yellow. Xxxxxx performed in the upper end of the At Expected Level range on this second part of the test (*Response Set* Combined scaled score = 12, 75th percentile). Here, Xxxxxx was able to shift and maintain a new and complex set involving both inhibition of previously learned responses and correctly responding to matching or contrasting stimuli. Next, Xxxxxx's planning and organization skills, visuoperceptual and visuospatial skills, and the concept of time in relation to analog clocks were assessed. Here, Xxxxxx drew the image of a clock and placed the hands where the examiner indicated. For visual items, Xxxxxx read the time on clocks that either have or do not have numbers. Her performance was in the At the Expected Level range on this task (Clocks Total score scaled score = 9, 37<sup>th</sup> percentile).

On another task, Xxxxxx worked adequate speed (*Inhibition-Naming* Completion Time scaled score = 8, 25<sup>th</sup> percentile) and accuracy (*Inhibition-Naming* Total Errors = 0, 51-75<sup>th</sup> percentile) when naming black and white shapes and directions of arrows. Her overall performance on the *Inhibition-Naming* task was in the At Expected Level range for her age (Combined Scaled Score = 10, 50<sup>th</sup> percentile). Next, Xxxxxx achieved an overall score in the Borderline range on the *Inhibition-Inhibition* task (Combined scaled score = 7, 16<sup>th</sup> percentile). On this task Xxxxxx was asked to say the other shape's name or state the opposite direction of the arrow when naming black and white shapes and directions of arrows. This task adds the demand of control of an automatic response and its replacement with a novel response. This creates an additional demand of cognitive flexibility because she must replace a logical response with a novel response. Notably, the number of Xxxxxx's *Inhibition-Inhibition* errors was in the Borderline range (raw

score = 3, 11-25<sup>th</sup> percentile) but her total completion time was in the At Expected Level range (scaled score = 9, 37<sup>th</sup> percentile). This finding **suggest that the inhibitory demands of this task did interfere slightly with XXXXX's accuracy but did not slow down her cognitive processing speed.** Similarly, her low Inhibition-Naming vs. Inhibition-Inhibition Contrast scaled score **indicates inhibitory control deficits that are not due to slow naming speed (Korkman et al., 2007).** Finally, XXXXX performed with age appropriate speed and accuracy on the *Inhibition-Switching* part of the task. Here, XXXXX was asked to name shapes and directions of arrows alternately depending on the color of the shape or arrow. She earned an average score on this task (*Inhibition-Switching* Combined scaled score = 11, 63<sup>rd</sup> percentile).

**Overall, XXXXX's attention, planning, cognitive flexibility, inhibition and organizational skills were varied and inconsistent. This pattern of responding is frequently found among children diagnosed with Attention Deficit Hyperactivity Disorder and/or children who have problems with emotional intrusions, e.g., depression and anxiety, interfering with smooth intellectual functioning.**

In the Language domain, XXXXX's receptive language skills, as evaluated by *Comprehension of Instructions*, were in the Borderline range for a person her age (scaled score = 7, 16<sup>th</sup> percentile). Here, she was asked to listen to increasingly complex oral instructions that instructed her to point to pictured target shapes, e.g., *point to a red circle but first to a blue square.* Next, XXXXX's ability to rapidly identify numbers and letters in alternating patterns was in the At Expected Level range (*Speeded Naming* Combined Scaled Score = 9, 37<sup>th</sup> percentile). On this task, she performed with adequate speed and accuracy. On another task, XXXXX was administered the *Word Generation* task. This task has two parts – *Semantic Word Generation* and *Initial Letter Word Generation*. For *Semantic Word Generation*, XXXXX was asked to name as many animals as possible within a 60-second time limit. Then she was asked to name as many foods or drinks as possible within a 60-second time limit. For *Initial Letter Word Generation*, XXXXX was required to name as many words as she can that begin with the letter F within a 60-second time limit and as many words as she can that begin with the letter S within a 60-second time limit. Her performance on the first part of the task was in the upper end of the At Expected Level range (*Word Generation* Semantic Total Score scaled score = 12, 75<sup>th</sup> percentile). Similarly, XXXXX's performance on *Word Generation* Initial Letter (Total Score scaled score = 11, 63<sup>rd</sup> percentile) was in the At Expected Level range for her age. The comparison between performance on semantic versus initial letter search (i.e., Semantic vs. Initial Letter Contrast Scaled Score) provides a measure of executive control over verbal search and retrieval functions. The initial letter categories require more efficient executive functions than semantic. XXXXX achieved a *Word Generation* Semantic vs. Initial Letter Contrast Scaled Score of 10 (50<sup>th</sup> percentile) - an At Expected Level score.

In the Memory and Learning domain, the *Memory for Designs* task showed XXXXX's above average spatial memory for novel visual material. Here, XXXXX was shown a grid with four to ten designs on a page, which was then removed from view. Then, she selected the designs from a set of cards and placed the cards on a grid in the same location as previously shown. Her immediate recall was in the lower end of the At

Expected Level range (Memory for Designs Total Score scaled score = 13, 84<sup>th</sup> percentile), indicating her adequate ability with rote memorization for the detail and location of visual stimulus details in two-dimensional space. XXXXXX's recall after a 25-minute delay was also in the Above Expected Level range for her age (Delayed Total Score scaled score = 13, 84<sup>th</sup> percentile).

On another task, XXXXXX was asked to look at a series of faces and then was shown three photographs at a time from which she selects a face previously seen. XXXXXX's ability to encode facial features, as well as face discrimination and recognition, were in the At Expected Level range for an individual her age (Total Score scaled score = 11, 63<sup>rd</sup> percentile). When asked to recall pictures of children's faces after a delay, XXXXXX's score was in the Above Expected Level range (*Memory for Faces* Delayed Total Score scaled score = 13, 84<sup>th</sup> percentile). Additionally, XXXXXX's high *Memory for Faces* Immediate vs. Delayed Contrast scaled score of 13 (84<sup>th</sup> percentile) – an Above Expected Level score – indicates that her face recognition improves with consolidation over time.

On the *Narrative Memory* task, XXXXXX was asked to listen to a story and then was asked to repeat the story. He was then asked questions to elicit missing details from the story. Here, XXXXXX's ability to listen attentively to extended prose, to comprehend what was heard, and to organize and retrieve this information was in the At Expected Level range (*Narrative Memory* Free Recall Total Score scaled score = 10, 50<sup>th</sup> percentile). Her average Free Recall and average Free & Cued Recall scores indicate that XXXXXX has adequate ability to express and access organized verbal information. Finally, on the *Word List Interference* task, XXXXXX's Repetition Total Score scaled score of 8 (25<sup>th</sup> percentile) was in the lower end of the At Expected Level range for her age. Here, XXXXXX was read a word or a brief sequence of unconnected words and asked to repeat them. She then repeated a second series of words. Thereafter, XXXXXX was asked to say the first word list and then the second list. In this way, the second word list acted as a source of interference for the recall of the first word list. Likewise, recalling the first list acted as interference for recalling the second list. This test works as a complex working memory test that requires both repetition and short-term memory for verbal material, as well as requiring the holding of this verbal material active in memory during a cognitive operation. Her average *Word List Interference*- Repetition Total Score (scaled score = 8, 25<sup>th</sup> percentile) - a score in lower end of the At Expected Level range - suggests adequate capacity in working memory. XXXXXX's Total Score scaled score of 11 (63<sup>rd</sup> percentile), on the *Word List Interference*-Recall part of the task, was also in the At Expected Level range. A score in this range suggests average capacity to maintain information in working memory in the presence of interfering stimuli and multitasking requirements.

In the Social Perception domain of the NEPSY-II, XXXXXX was administered the *Theory of Mind* task. Poor performance on this task is sometimes found in children with ADHD, autism spectrum disorders or other problems, and can result in interpersonal difficulties or poor behavioral control. The *Theory of the Mind* verbal subtest is designed to assess the child's skill for understanding, explaining, predicting and influencing the behavior of others. Good skills in this area reflect the ability to take into account the perceptions of others, or understanding the intentions, social communications and verbal

communications of others. Xxxxxx’s Theory of Mind-Verbal Score raw score of 20 (26-50<sup>th</sup> percentile) was in the At Expected Level range of functioning

The Visuospatial Processing domain assesses different components of visual-spatial perception and production ability. Xxxxxx performed in the At Expected Level range on a task where she was asked to copy increasingly complex geometric forms – a pencil-and-paper task (*Design Copying* General Total Score raw score = 11, 26-50<sup>th</sup> percentile). Next, Xxxxxx again performed in the At Expected Level range on a task designed to assess, visuospatial analysis, evaluation of directions, and mental rotation (*Geometric Puzzles* Total Score scaled score = 11, 63<sup>rd</sup> percentile). Here, for each item, Xxxxxx matches two shapes outside of the grid to two shapes within the grid. Finally, on the *Picture Puzzles* task, Xxxxxx was presented a large picture divided by a grid and four smaller pictures taken from sections of the larger picture. She was asked to identify the location on the grid of the larger picture from which each of the smaller pictures was taken. This task is designed to assess visual discrimination, spatial localization, and visual scanning, as well as the ability to deconstruct a picture into its constituent parts and recognize part-whole relationships. Here, Xxxxxx earned an At Expected Level score for a person her age (*Picture Puzzles* Total Score scaled score = 9, 37<sup>th</sup> percentile).

**Emotional, Behavioral and Personality Functioning**

To assess Xxxxxx’s emotional and personality functioning the Child Behavior Checklist, Conners’ Rating Scale, Timberlawn Child Functioning Scale, Teacher Report Form, Youth Self Report, and Personality Assessment Inventory were administered. The results are below.

***The Personality Assessment Inventory***

Scales	T-Score
Inconsistency (ICN)	36
Infrequency (INF)	45
Negative Impression (NIM)	45
Positive Impression (PIM)	51
Somatic Complaints (SOM)	46
Conversion (SOM-C)	49
Somatization (SOM-S)	48
Health Concerns (SOM-H)	42
Anxiety (ANX)	47
Cognitive (ANX-C)	45
Affective (ANX-A)	49
Physiological (ANX-P)	49
Anxiety-Related Disorders (ARD)	53
Obsessive-Compulsive (ARD-O)	53
<b>Phobias (ARD-P)</b>	<b>61</b>
Traumatic Stress (ARD-T)	45
Depression (DEP)	50
Cognitive (DEP-C)	52

Affective (DEP-A)	43
Physiological (DEP-P)	53
Mania (MAN)	41
Activity Level (MAN-A)	38
Grandiosity (MAN-G)	46
Irritability (MAN-I)	45
Paranoia (PAR)	40
Hypervigilance (PAR-H)	40
Persecution (PAR-P)	46
Resentment (PAR-R)	43
Schizophrenia (SCZ)	42
Psychotic Experiences (SCZ-P)	45
Social Detachment (SCZ-S)	47
Thought Disorder (SCZ-T)	42
Borderline Features (BOR)	44
Affective Instability (BOR-A)	41
Identity Problems (BOR-I)	50
Negative Relationships (BOR-N)	46
Self-Harm (BOR-S)	44
Antisocial Features (ANT)	45
Antisocial Behaviors (ANT-A)	44
Egocentricity (ANT-E)	49
Stimulus-Seeking (ANT-S)	46
Alcohol Problems (ALC)	43
Drug Problems (DRG)	44
Aggression (AGG)	48
Aggressive Attitude (AGG-A)	45
Verbal Aggression (AGG-V)	53
Physical Aggression (AGG-P)	47
Suicidal Ideation (SUI)	42
Stress (STR)	42
Nonsupport (NON)	43
Treatment Rejection (RXR)	46
Dominance (DOM)	40
Warmth (WRM)	56

Summary of Test Results:

On the Personality Assessment Inventory scores for the Inconsistency scale, Infrequency, Negative Impression, and Positive Impression scales were within the average suggesting that Xxxxxx did attend appropriately to the PAI item content and did not attempt to present an unrealistically favorable or unfavorable impression in completing the test. .

Xxxxxx’s average score on the *Somatic Complaints* scale reflects a person with few bodily complaints (T-score = 46). Her average score on the *Anxiety Scale*, reflects a person with few complaints of anxiety or tension (T-score = 47).

Her average score in the Anxiety-Related Disorders scale, reflects a person who reports little distress across many situations. Such individuals are typically seen as secure, adaptable, and effective in dealing with stress (T score=53). However, XXXXXX's score on the *Phobias subscale* (T score= 61) was slightly elevated reflecting a person who tends to monitor their environment in an unrealistically vigilant fashion to avoid contact with feared object, and this vigilance is likely to be constricting life activities.

On the *Depression* scale, XXXXXX's score was in the average range (T-score = 50) reflecting a person with few complaints about unhappiness or distress. Such individuals are typically seen as being stable, self-confident, active, and relaxed.

On the *Mania* scale, XXXXXX's average score reflects a person with few features of mania or hypomania (T score=41). XXXXXX's average score on the *Paranoia* scale reflects a person who reports being open and generally forgiving in relationships with others (T-score = 40). Her average score on the *Schizophrenia* scale reflects a person who reports being effective in social relationships and has no trouble with attention or concentration problems (T score=42).

XXXXXX's average score on the *Borderline Features* scale reflects a person who reports being emotionally stable and whom also has stable relationships (T score=44). On the *Antisocial Features* scale, her average score reflects an individual who reports being reasonably empathic and warm in relationships with others and typically exhibits reasonable control over impulses and behavior (T score=45).

XXXXXX's average score on the *Alcohol Problems* scale reflects an individual who describes little to no alcohol intake and few adverse consequences related to drinking (T-score=43). Similarly, her score on the *Drug Problems* scale reflects a person who reports using drugs infrequently, if at all (T-score =44).

On the *Aggression* scale XXXXXX's average score (T-score=48) reflects a person with reasonable control over the expression of anger and hostility. Likewise, her average *Suicidal Ideation* scale score (T-score = 42) reflects a person who has few thoughts about death or suicide. XXXXXX's average score on the *Stress* scale reflects a person who reports his or her life as stable, predictable, and uneventful (T-score = 42).

XXXXXX's average score on the *Nonsupport* scale (T-score=43) reflects an individual who reports generally supportive connections with family and friends.

XXXXXX's score on the *Treatment Rejection* scale was in the average range (T-score = 46). Scores within this range are indicative of individuals who are generally satisfied with herself or herself as they are and see little need for major changes in his or her behavior.

XXXXXX's score was average on the *Dominance* scale (T-score = 40) suggesting an individual who is friendly and appropriately independent, and is neither controlling in relationships nor submissive.

Finally, on the *Warmth* scale, Xxxxxx's score (T score =56) is reflective of an individual who is warm, sympathetic, and supportive towards others.

***Child Behavior Checklist - Syndrome Scale Scores and DSM-Oriented Scales***

B = Borderline Clinical Range, C = Clinical Range (T Scores Mean= 50)

<b>Scales</b>	<b>Mother</b>	<b>Father</b>	<b>Self Report</b>	<b>Teacher</b>
<b>Anxious/Depressed</b>				
<b>Withdrawn/Depressed</b>		66B		
<b>Somatic Problems</b>				
<b>Social Problems</b>				
<b>Thought Problems</b>				
<b>Attention Problems</b>				
<b>Rule-Breaking Behaviors</b>				
<b>Aggressive Behavior</b>				
<b>Internalizing Problems</b>	60B	63B		
<b>Externalizing Problems</b>	61B			
<b>Total Problems</b>	62B			
<b>Affective Problems (DSM-Oriented Scales)</b>				
<b>Anxiety Problems (DSM-Oriented Scales)</b>				
<b>Somatic Problems (DSM-Oriented Scales)</b>				
<b>Attention-Deficit/Hyperactivity Problems (DSM-Oriented Scales)</b>	66B			

<b>Oppositional/Defiant Problems (DSM-Oriented Scales)</b>				
<b>Conduct Problems (DSM-Oriented Scales)</b>				

Competence Scale Scores for Girls 11-18

Scales	Mother	Father	Self Report
<b>Activities</b>			
<b>Social</b>		32B	
<b>School</b>			

Competence Scale Scores for Girls 12-18

Scales	Teacher
<b>Academic Performance</b>	
<b>Working Hard</b>	
<b>Behaving</b>	
<b>Learning</b>	
<b>Happy</b>	
<b>Sum</b>	

**Conners' Rating Scale – Revised: Long Version**

Significant T-Scores (T≥67, Clinical Concern, T=50, Mean)

B = Borderline Clinical Range, C = Clinical Range

Scales	Father	Mother	Teacher
Oppositional		62B	
Cognitive Problems/Inattention	66B	68C	74C
Hyperactivity		62B	
Anxious/Shy	72C		
Perfectionism			
Social Problems			

Psychosomatic			
Conners' ADHD Index	63B	70C	67C
Conners' Global Index Restless/Impulsive		71C	
Conners' Global Index Emotional Lability		60B	
Conners' Global Index Total		68C	
DSM-IV Inattention	69C	75C	83C
DSM-IV Hyperactive Impulsive		62B	
DSM-IV Total	66B	73C	77C

Summary of Test Results:

The Child Behavior Checklist was completed by Xxxxx's mother and father, and Xxxxx completed a self-report version of the scale in order to obtain perceptions of Xxxxx's adaptive functioning, competencies, and problems. On the CBCL form completed by XXXXXXXXXXXXXXX, she reported that Xxxxx has four or more close friends and that Xxxxx's academic performance in Language Arts and Social Studies is above average and her performance in Science and Math is average. XXXXXXXXXXXXXXX's ratings on the Total Competence scale and subscales all fell in the average range. XXXXXXXXXXXXXXX rated Xxxxx in the borderline range on the Total Problems, Internalizing Problems, and Externalizing Problems scales. On the DSM-oriented scales, Xxxxx's score on the Attention Deficit Hyperactivity Problems scale was in the borderline range, suggesting that the DSM-IV should be consulted to determine if Xxxxx meets criteria for Attention Deficit Disorder.

On the Child Behavior Checklist, Xxxxx's father reported that Xxxxx has two to three close friends and rated Xxxxx's performance as above average in Language Arts, Math, and Science, and average in Social Studies. XXXXXXXXXXXXXXX rated Xxxxx in the normal range on the Total Problems and Externalizing Problems scales, and in the borderline range on the Internalizing Problems scale. XXXXXXXXXXXXXXX rated Xxxxx in the borderline range on the Withdrawn/Depressed. These results indicate that XXXXXXXXXXXXXXX reported more problems than are typically reported by parents of girls age 11 to 18, particularly withdrawn or depressed behavior. Similar to XXXXXXXXXXXXXXX's rating, Xxxxx's father rated her in the normal range on Anxious/Depressed, Attention Problems, Rule Breaking behavior, Aggressive Behavior, Somatic Complaints, Social Problems, and Thought Problems scales. XXXXXXXXXXXXXXX rated Xxxxx in the normal range on all of the DSM-oriented scales.

On the YSR Self Report Form completed by XXXXXX, she reported that she has more than four friends and rated her academic performance in Language Arts, Science, Social Studies, and Math as average. XXXXXX's Total Competence was in the normal range for self reports of girls aged 11 to 18. Her scores on the Activities and Social scales were both in the normal range. On the YSR problem scales, XXXXXX's Total Problems, Externalizing Problems, and Internalizing Problems scales were in the normal range. Scores on all rated syndrome scales were in the normal range. On the DSM-oriented scales all of XXXXXX's scores were also in the normal range.

The Teacher Report form was completed by XXXXXX's Science teacher to obtain perceptions of XXXXXX's adaptive functioning and problems. XXXXXX's Science teacher rated XXXXXX as working slightly less hard, behaving much less appropriately, learning slightly less, and slightly less happy compared to typical students of the same age. XXXXXX's Academic Performance and Total Adaptive Functioning scales were in the normal range. XXXXXX's Total Problems, Internalizing, and Externalizing scores all fell in the normal range for girls aged 12 to 18. Scores on all syndrome scales fell in the normal range. On the Attention Problems subscales, XXXXXX's score for Inattention was high enough to warrant concern while her score on the Hyperactivity/Impulsivity was in the normal range. On the DSM oriented scales all scores fell in the normal range.

The Conners' Rating Scale was administered to XXXXXX's mother, father, and Science teacher. All three respondents ratings indicate elevated scores in the clinically significant range on the DSM-IV Inattentive Scale, suggesting that XXXXXX has more inattentive behaviors when compared to female peers her age. XXXXXX's mother's ratings on the Oppositional, Hyperactivity, Emotional Lability, and DSM-IV Hyperactive-Impulsive scales fell in the borderline range, suggesting that XXXXXX exhibits more oppositional, hyperactive, and impulsive behaviors as well as more emotional responses when compared to female peers her age. XXXXXXXXXXXXXXX also rated XXXXXX in the clinical range on the Inattention scale, Conners ADHD Index, Conners Global Index, and DSM-IV Total scales. These ratings suggest that according XXXXXXXXXXXXXXX XXXXXX is "at risk" for ADHD. Similarly, XXXXXXXXXXXXXXX rated XXXXXX in the borderline range on the Inattention, Conners ADHD Index, and DSM-IV Total Sales. He also rated XXXXXX in the clinical range on the Anxious/Shy scale suggesting that XXXXXX displays more anxious behaviors when compared to same age peers. XXXXXX's teacher rated her in the clinical range on the DSM-IV Total scale, Inattention scale, and Conners ADHD Index suggesting that XXXXXX displays behaviors that are consistent with a diagnosis of ADHD, which is concurrent with both parents' ratings.

On the Timberlawn Child Functioning Scale, XXXXXX's mother, father, and Science teacher, rated XXXXXX's functioning across several areas such as likeability, language, thinking/behavior, educational performance, personal hygiene/self help skills, sexuality, and acceptance of rules. In the area of Likeability, XXXXXX's parents' ratings indicate that others have strongly positive feelings for XXXXXX, whereas, XXXXXX's teacher's ratings suggest that others have mildly positive feelings of XXXXXX. XXXXXX's language skills were rated as being appropriate by all respondents. Regarding thinking and behavior, she was rated as having logical and organized thinking by all respondents. Regarding attention span and activity level, XXXXXX was rated as having below average



visual information processing and abstract reasoning skills. However, XXXXXX's lowest subtest score (scaled score = 8, 25<sup>th</sup> percentile) was in Perceptual Reasoning domain on the *Block Design* subtest. The *Block Design* task is designed to measure the ability to analyze and synthesize abstract visual stimuli. It also involves nonverbal concept formation, visual perception and organization, simultaneous processing, and the ability to separate figure and ground in visual stimuli. Next, in the Processing Speed domain, XXXXXX has well developed short-term visual memory, cognitive flexibility, visual discrimination, and concentration as well as average visual-motor coordination, visual scanning ability, and cognitive flexibility. On the other hand, XXXXXX's Working Memory is a relative personal weakness. She obtained a scaled score of 8 (25<sup>th</sup> percentile) on the *Digit Span* subtest that measures auditory short-term memory, sequencing skills, attention, and concentration. **Overall, XXXXXX is an early adolescent female with average to high average general intellectual ability. She is capable of average to above average performance with both verbal and nonverbal tasks. Her skills are less well developed in the area of Working Memory.**

XXXXXX's achievement test scores in *Reading Comprehension* (standard score = 121, 92<sup>nd</sup> percentile), *Numerical Operations* (standard score = 120, 91<sup>st</sup> percentile), *Spelling* (standard score = 105, 63<sup>rd</sup> percentile) *Written Expression* (standard score = 122, 93<sup>rd</sup> percentile), *Listening Comprehension* (standard score = 104, 61<sup>st</sup> percentile), Mathematics Composite (standard score = 108, 70<sup>th</sup> percentile) and Written Language Composite (standard score = 115, 84<sup>th</sup> percentile) are generally consistent with or significantly higher than her Predicted Scores of 105, (63<sup>rd</sup> percentile), 104 (61<sup>st</sup> percentile), 104 (61<sup>st</sup> percentile), 104 (61<sup>st</sup> percentile), 105 (63<sup>rd</sup> percentile), 105 (63<sup>rd</sup> percentile) and 105 (63<sup>rd</sup> percentile), respectively. By contrast, XXXXXX's achievement scores in *Word Reading* (standard score = 95, 37<sup>th</sup> percentile), *Pseudoword Decoding* (Standard Score = 86, 18<sup>th</sup> percentile), *Math Reasoning* (standard score = 95, 37<sup>th</sup> percentile) and her composite score for Reading (Standard Score = 98, 45<sup>th</sup> percentile) are significantly lower than her Predicted Scores of 104 (61<sup>st</sup> percentile), 104 (61<sup>st</sup> percentile), 105 (63<sup>rd</sup> percentile), and 105 (63<sup>rd</sup> percentile), respectively. **These discrepancies between ability and achievement support diagnoses of Learning Disorders in Reading and Mathematics.**

XXXXXX's profile on neuropsychological and achievement testing is frequently found among children with a mild to moderate phonological dyslexia. It was noted above that XXXXXX had relative difficulty with a decoding task. While her score was slightly below average (18<sup>th</sup> percentile) her decoding skills are much lower than would be expected given her IQ. For XXXXXX, the process of reading a word by converting it to sound and then processing it for meaning as an auditory unit appears to be impaired. However, processing the word directly as a visual unit for meaning (the direct route) seems to be intact. So long as the direct route into the semantic system is intact, a difficulty may not be apparent unless a new, or nonsense, word is presented. The phonological route to reading is the only way we can read new words, but if this is damaged then we have no idea how to pronounce the set of letters composing the word. This became apparent when XXXXXX was asked to read nonsense words such as 'dreep', 'thag', and 'clotch'. Due to her deficit in encoding phonological information into short-term memory and her frustration with processing an auditory unit for meaning, XXXXXX tends to read by "sight

vocabulary.” Additionally, her below average performance on the *Comprehension of Instructions* task of the NEPSY-II and the Digits Forward portion of the *Digit Span* subtest of the WISC-IV is consistent with this conclusion. On these tasks she struggled to comprehend and respond to increasingly complex oral instruction and to retain rote information in auditory short-term memory. It is notable that XXXXXX’s encoding deficits and weak working memory are most evident for rote, monotonous, and lengthy auditory information. A comprehensive Speech and Language evaluation is recommended for XXXXXX with particular attention to her phonological processing skills and receptive language skills.

Since XXXXXX is having difficulty sequencing letters in unknown words, and has some other qualities of dyslexics, it is likely that she will have difficulty learning a foreign language where she must learn new rote information and also recall new spelling patterns with the letters in the correct sequence. Learning a language is very difficult for people with XXXXXX’s learning difficulties as it taps into their areas of weakness.

XXXXXX’s performance was varied and inconsistent in the Attention and Executive Functioning domain of the NEPSY-II. Although this pattern of responding is frequently found among children diagnosed with ADHD, it is also found among children who have problems with depression or anxiety interfering with attention, concentration, and smooth intellectual functioning. It is this examiner’s opinion that XXXXXX’s ADHD and some mild performance anxiety explain her inconsistent performance on tests of attention, planning, cognitive flexibility, inhibition and organizational skills. This conclusion is supported by the results of neuropsychological testing, background information, and other questionnaire data obtained in this evaluation.

In summary, XXXXXX presents with a mild to moderate Reading Disorder that appears to be related to several neuropsychological vulnerabilities. Phonological processing difficulties, encoding deficits, and impairments in working memory appear to underlie XXXXXX’s underachievement in word reading and decoding skills. By contrast, XXXXXX’s performance on tasks of visual-spatial perception and production ability as well as her performance on memory and learning tasks with visual-spatial material were At the Expected Level or above for a person her age. These findings contraindicate right hemisphere dysfunction and, therefore, nonverbal learning deficits do not appear to account for XXXXXX’s underachievement in math reasoning. However, receptive language problems such as encoding deficits and impairments in working memory may be related to her difficulty processing and solving mathematics word problems. Moreover, XXXXXX’s underachievement in math may also be associated with the chronic effects of untreated ADHD. Up to this point, XXXXXX may have been able to compensate for her weaknesses with a number of cognitive strengths and assets. Now that school has become more demanding, she is experiencing some difficulties, as her weaknesses are likely to come to the fore.

It is not unusual for higher functioning youngsters with XXXXXX’s profile of strengths and weaknesses to require extra help with organizing and learning, even well into their college years. XXXXXX will benefit from support from adults, a safety net that he can count on as she learns some new strategies for learning and some extra help is put into

place for her. Once her program is reorganized, her stress level may be reduced and she may be able to perform better. Given her intellectual strengths, she is likely to learn new strategies for self-help as she grows.

In terms of emotional, behavioral and personality functioning, there is no evidence of major mental illness for XXXXXX in the findings of this evaluation. However, there is questionnaire data from several sources, as well as neuropsychological test findings and background information, to **support a diagnosis of ADHD, Inattentive Type**. Her symptoms currently appear to be partially controlled with stimulant medication. Additionally, there is questionnaire data suggesting that **anxiety, possibly as an overlay to her learning difficulties and/or related to developmental issues, is becoming more apparent to her parents**. Additionally, XXXXXX's self-report of moderate phobic anxiety on the PAI, suggests that some avoidance behavior is beginning to develop. A specific feared object or event might be a valuable issue for exploration in therapy. Given the family history of anxiety disorder as a risk factor, careful monitoring of XXXXXX by a mental health professional for the emergence of clinical levels of anxiety or depression is recommended.

#### **DSM-IV-TR Multiaxial Assessment**

##### **Axis I: Clinical Disorders and Other Conditions That May Be a Focus of Clinical Attention**

314.00 Attention-Deficit/Hyperactivity Disorder, Inattentive Type

315.00 Reading Disorder

315.1 Mathematics Disorder

##### **Axis II: Personality Disorders and Mental Retardation**

V71.09 No Diagnosis

##### **Axis III: General Medical Conditions**

No Diagnosis. (ICD-9-CM v71.09)

##### **Axis IV: Psychosocial and Environmental Problems**

Educational Problems: academic problems

##### **Axis V: Global Assessment of Functioning (GAF) Scale**

Current GAF: 58

Highest GAF past year: 63

## **Recommendations:**

### **General**

1. XXXXXX's parents should share this report with XXXXXX's PCP, Dr. xxxxxxxxxxxxxxxx, the school team, and her counselor, xxxxxxxxxxxxxxxx.
2. It is recommended that XXXXXX be determined eligible for special education based on her Reading and Mathematics Disorders. In order to facilitate the process of determining eligibility and developing an IEP for XXXXXX, her parents should submit to the xxxxxxxxxxxxxxxx – Department of Special Education - a written request for an initial evaluation for special education eligibility. Unless the school district waves its right to conduct their initial evaluation, the submission of XXXXXX's independent evaluation will need to be postponed until the district has completed its assessment.
3. XXXXXX's parents may want to consider Special Education advocacy xxxxxxxxxxxxxxxx or other provider, such as the Federation for Children with Special Needs or the Council of Parent Attorneys and Advocates to ensure that XXXXXX's needs are met at school.
4. It is recommended that XXXXXX receive a comprehensive Language Evaluation with particular attention to her phonological processing and receptive language skills.
5. It is recommended that XXXXXX receive resource room support for reading and math. These services should be delivered by a special educator with training and experience in addressing the needs of students with learning disorders induced by phonological processing, encoding, and working memory deficits, as well as ADHD. The special educator should incorporate the methods and strategies described in the Reading and Mathematics recommendations sections below.
6. XXXXXX requires structure, scaffolding and modeling in her classes so as to provide the organization and structure that she cannot generate on her own.
7. XXXXXX should be placed in classes where the teacher is well organized and provides a daily schedules or lists of expectations. The teacher should be structured yet flexible enough to provide the accommodations that Ryan requires.
8. In all teaching, use multiple instructional modalities. Pairing verbal explanations with visual demonstrations and providing hands-on activities will improve XXXXXX's attention to tasks.
9. It may be beneficial for XXXXXX to participate in an education and support group of adolescents in her age range to facilitate her understanding of ADHD and how it affects her, to teach her how to advocate for herself and set up situations for success, and to help her recognize that she is not unique in having this condition.
10. Continued medication monitoring is important, to ensure that XXXXXX's medication and dosage is optimal for her. Although Vyvanse is a long acting stimulant

medication, a small dose of short acting Ritalin later in the day may be of benefit to Xxxxxx in controlling ADHD rebound symptoms. Of course, sleep latency would need to be monitored closely with any afternoon dosing. A parent consultation with Dr. Reardon to consider this modification in Xxxxxx’s medication regimen is recommended.

11. It is recommended that Xxxxxx continue her individual counseling with Ms. Susan Cardinal. In addition, anxiety and stress management issues, the counseling should ensure that Xxxxxx understands the nature of ADHD, how it affects her, and the reason for medication. The counseling should also provide an opportunity for Xxxxxx to discuss his feelings about having this condition, ask questions as they arise, and learn how to handle problem situations.
12. If Xxxxxx is required to study a foreign language, she will need weekly extra help from her teacher or other professional (peer tutoring is not recommended).
13. Reevaluation with neuropsychological and psychoeducational testing in one to two years.

**Short-Term Memory**

Involves the ability to hold information in mental awareness and use it within a few seconds. May be influenced by attention.

Implications	Recommendations
<ul style="list-style-type: none"> <li>• Following directions</li> <li>• Remembering information long enough to process it for understanding</li> <li>• Recalling sequences</li> <li>• Memorizing factual information (e.g., math facts)</li> <li>• Listening to and comprehending lengthy discourse</li> <li>• Taking notes</li> </ul>	<ul style="list-style-type: none"> <li>• Keep oral directions short and simple</li> <li>• Ensure directions are understood; have student or paraphrase directions.</li> <li>• Provide compensatory aids (e.g., write directions, procedures, and assignments on board or paper, provide lecture notes or arrange for peer-shared notes, provide study guide to be filled out during pauses in presentation.</li> <li>• Provide overlearning, review and repetition</li> <li>• Teach memory strategies (e.g., chunking, verbal rehearsal, visual imagery)</li> </ul>

**Accommodations - Academic and Attention**

1. It is very difficult to stop children and adolescents from rushing through tasks. Perhaps tasks could be presented to Xxxxxx in parts or “chunks”, so that she does not feel that she has been presented with a long, daunting task. She may work more carefully on the smaller chunks.
2. Xxxxxx may be inclined to rush through tasks that she knows she cannot do well or that tap into her weaknesses. Her teachers should build their awareness of what

interests her, and then tap into her interests and strengths.

3. It will be critical to XXXXXX's progress at school that all personnel who work with her are educated as to her needs, and provide consistent support across environments.
4. XXXXXX will need support in all aspects of organization, including organizing her time and her possessions. XXXXXX would benefit from a weekly extra help session with a tutor or teacher, where she may check in, get organized, and go over assignments with which she is having difficulties.
4. It is recommended that XXXXXX have the opportunity to take breaks during tests as an accommodation.
5. To minimize her fatigue and frustration, XXXXXX will require breaks from tasks that require her to focus intensely.
6. To help her compensate for attentional difficulties, XXXXXX could benefit from classroom accommodations such as these:
  - Preferential seating (in the front of the room)
  - Teacher cueing to attract and focus her attention.
  - XXXXXX will benefit from being cued when important instructions or information are to be given.
  - Seat XXXXXX away from fans, air conditioners, or open doors, which can be distracting
8. XXXXXX will benefit from having a study area with few distractions (i.e., visual distractions, distracting stimuli, etc.).
9. XXXXXX is more likely to remember the content of a lecture if she can devote her full attention to listening rather than dividing her attention between listening and note-taking. To this end, provide her with a copy of your lecture notes or a copy of the notes of a student who is a particularly good note-taker.

### **Instruction**

1. Provide intensive repetition, practice, and review in learning activities. To promote retention, provide activities to reinforce the skills or content at frequent and regular intervals, gradually increasing the intervals to less frequent and intermittent.
2. In each teaching session, before introducing new information to XXXXXX, review previous information from the last lesson and check for mastery.
3. When teaching XXXXXX new skills, provide frequent opportunities for practice and review. Provide systematic review within a few hours and for the next few days and then slowly fade review. Check retention after a week has passed without review, then two weeks, and a month.

4. Whenever it is possible, use a game format for learning (e.g., reviewing for a test by playing Jeopardy with the target information). XXXXX will find it easier to attend to the information and hold it in mind long enough to process it more effectively.

### **Multiple Modalities**

1. When introducing new information and skills, provide XXXXX with pictures to look at or a way to visualize and form associations regarding what she is learning.
2. Use graphic organizers to teach new concepts and information. When XXXXX can picture how the ideas are interrelated, she will be able to store and retrieve them more easily.
3. XXXXX will need multisensory instruction in subjects, like Science and Foreign Language, where he must learn new vocabulary, spellings, and other rote material. He should utilize the following in class and in extra help:
  - recitation from memory, when possible
  - flashcards that XXXXX creates herself
  - computer software
  - frequent brief quizzes and knowledge checks
  - repeated readings
  - repeated writing or keyboarding of the material
  - create cartoons and sketches to help recall vocabulary words
4. Present all types of verbal information accompanied by visual stimuli that clearly illustrate the concept being taught. Examples are: pictures, charts, graphs, semantic maps, and videotapes. Simultaneous visual-verbal presentation will improve comprehension and retention of information.
5. Provide experiential approaches to learning to enhance memory.

### **Math Reasoning**

1. Demonstrations and hands-on activities will improve XXXXX's comprehension of and attention to mathematics tasks.
2. If hands-on materials are not part of the regular lesson it will be important to provide these specifically as an accommodation for XXXXX.
3. Her lessons should be multi-sensory, and could utilize workbooks, games, flash cards and computer software. She may enjoy online sites such as "www.funbrain.com".
4. Due to her attentional difficulties, XXXXX is likely to make errors of the type commonly called "careless". XXXXX needs assistance with checking her work for

“careless” errors. Checking her work should be a required step for her, i.e., she should be reminded to check all work herself before handing it in.

5. Teach XXXXXX how to differentiate among assignment propositions, relational statements, and questions.
6. As XXXXXX appears to have difficulty converting relational statements (e.g., a plane travels 10 times faster than a car, Tia’s grade is 17 points higher than Robin’s) into mathematical expressions, focus instructional time on interpreting and paraphrasing a wide variety of relational statements and then representing them in mathematical form.
7. To help XXXXXX recognize the mathematical structure of word problems, provide direct instruction in comparing a group of word problems and identifying those with the same mathematical structure by drawing representations of the problem structures (i.e., equation network), for example, with a chart or diagram (d’Ailly, 1995).
8. When presenting a new type of problem or equation, in addition to instructing XXXXXX in how to work them, give her examples that have already been worked. Give her time to study them, answer any questions he has, and have her use them as models while working problems with the same structure. This strategy should help her recognize the problem structure at a later time and facilitate the solution.
9. XXXXXX’s difficulty with comprehending word problems increases along with level of abstraction. She will have more success if, within each procedure or concept presented, concrete factual problem types are introduced first, concrete hypothetical second, abstract factual third, and abstract hypothetical, the most difficult, last. Examples of each problem type follow:
10. *Concrete Factual*: A farmer has eight more hens than dogs. Since hens have two legs each, and dogs have four legs each, all together the animals have 118 legs. How many dogs does the farmer own?
11. *Concrete Hypothetical*: There are four more girls in an English class than boys. If there were six times as many girls and twice as many boys, there would be 136 pupils. How many boys are there?
12. *Abstract Factual*: The value of a given number is six more than the value of a second number. The sum of two times the first number and four times the second number is 126. what is the value of the second number?
13. *Abstract Hypothetical*: A given number is six more than a second number. If the first number were four times as large and the second two times as large, their sum should be 126. what is the second number? (Caldwell & Goldin, 1987).

14. To help XXXXXX learn to analyze and then reintegrate the information in a problem, teach her to create a situational model (e.g., picture, diagram) of the problem before trying to set up a quantitative representation such as an equation. Research indicates that inclusion of this intermediate step (the situational model) is positively related to correct solutions (d'Ailly, 1995).
15. Use the following types of self-questioning strategies to help XXXXXX learn how to represent algebra word problems (Hutchinson, 1993):
  - Have I read and understood each sentence? Are there any words whose meaning I need to ask?
  - Have I gotten the whole picture of the problem?
  - Have I written down my representation of the problem on my worksheet? (goals; unknown(s); known(s); type of problem; equation)
  - What should I look for in a new problem to see if it is the same kind of problem?
16. Use tutorial computer software to reinforce word problem-solving strategies, representations, and solutions but make sure that XXXXXX is able to transfer the ability demonstrated when using the program to paper-pencil tasks.

### **Reading**

#### *Embedded Phonics*

1. Provide XXXXXX with practice in word attack skills using high interest reading materials. When XXXXXX comes to a word that she does not know, provide phonic clues (such as the initial sound) to help her identify the word.
2. Teach phonics instruction within meaningful text reading. Highlight specific phonic elements when they appear in text.
3. Integrate phonics instruction into daily reading and writing activities. Provide opportunities for XXXXXX to use her knowledge of letter-sound relationships.

#### *Multisyllabic Words*

1. Teach XXXXXX the six most common syllable structures. Show her how recognizing the syllable structure will aid with word pronunciation and help her know how to pronounce the vowel sound.
2. A good supplementary activity for practicing recognition of the syllable structures and their most common pronunciations is *Syllable Plus: A Game to Teach Syllable Types* (Stoner, 1985). Available from Educational Tutorial Consortium, 4400 South 44th, Lincoln, NE 68516, (402) 489-8133.

3. Teach XXXXX how to use structural analysis to decode multisyllabic words. Ensure that she “over learns” these skills so that she begins to see unfamiliar words as a sequence of recognizable word parts. Teach her to identify both meaning parts (prefixes, suffixes, and root words) and pronunciation parts (common clusters and syllables).
4. Some activities and programs that might be helpful in this regard are:
  - Reinforce XXXXX’s pronunciation and knowledge of the meaning of affixes and root words by providing XXXXX with the most common prefixes, suffixes, and root words printed on index cards, one to a card. Have XXXXX build and then pronounce both real and nonsense words by rearranging the cards (e.g., subductable – able to be taken under; transportation – the act of carrying across).
  - Reinforce XXXXX’s recognition and pronunciation of affixes and root words by using activities in game format, such as Intermediate Syllable Plus (Anderson, Cross, & Stoner, 1992) and Advanced Syllable Plus (Anderson, Cross, & Stoner, 1994). In these activities, students categorize a wide variety of the most common prefixes, suffixes, and roots by syllable type and pronunciation. Available from Educational Tutorial Consortium, 4400 South 44th, Lincoln, NE 68516, (402) 489-8133.
5. Focus XXXXX’s decoding and spelling instruction on content area words while teaching syllabication and structural analysis. One program specifically addressing the needs of older learners is *WORDS: Integrated Decoding and Spelling Instruction Based on Word Origin and Word Structure* (Henry, 1990). This program, intended for grades 3-8 and older students with learning disabilities, includes activities such as organizing letter-sound correspondences, studying syllable patterns, learning about word origins, and practicing decoding and spelling multisyllabic words taken from math, social studies, and science textbooks. The manual contains a tests, content area word lists, non-phonetic word lists, and spelling rules. Available from PRO-ED, 8700 Shoal Creek Blvd., Austin, TX 78757-6897, (800) 897-3202, <http://www.proedinc.com>.
6. Teach structural analysis by cutting apart words into common clusters. Keep the letters of the words you are working with large. Combine the word parts in a variety of ways to make psuedowords or real words to pronounce. Let XXXXX then scramble the letters to make new words for you to pronounce.
7. Make a chart with several suffixes listed down the side, such as *ing*, *er*, and *ed*. Write root words across the top. Have XXXXX determine which endings can be added to form new real words. When he has completed the chart, have her pronounce all the words.

8. Use high-interest materials, such as magazines or newspaper articles to reinforce pronunciation of multisyllabic words. Before reading, have XXXXXX scan the passage, underline, and attempt to pronounce words containing three or more syllables.
9. Have XXXXXX engage in activities that will develop his automatic recognition of any affixes, specific letter patterns, and morphemes on which XXXXXX is working, such as *ing* or *cious*.
10. To develop automatic recognition of the word part on which XXXXXX is working, prior to reading a passage aloud, have her color code or highlight it each time it appears in the text.
11. To familiarize XXXXXX visually with affixes, introduce her to a short list of prefixes and suffixes with their most common meanings. Provide practice pronouncing these affixes with a variety of root words.
12. To teach immediate visual recognition of common affixes, have XXXXXX scan for them in his school texts or the newspaper.
13. Prior to having XXXXXX read a passage, underline any multisyllabic words that she may have difficulty pronouncing. Review pronunciation of the words. Have XXXXXX then practice reading the words fluently in context.
14. When pronouncing multisyllabic words, have XXXXXX slide his index finger slowly under the word parts as she pronounces them.
15. Teach syllabication and structural analysis through a highly structured and sequential program that highlights the visual aspect of the word parts and reinforces a strong association with their corresponding sounds. One such method is *Glass-Analysis Method for Decoding Only* (Glass, 1973, 1976).
16. Teach XXXXXX a learning strategy, such as DISSECT (Lenz, Schumaker, Deshler, & Beals, 1984), to use when she encounters unknown words.

### *Sight Word Identification*

#### General

1. Teach XXXXXX to recognize and pronounce common exception words (e.g., *once*). Discuss with XXXXXX that some words are not consistent in sound-symbol correspondence and that these irregular or exception words must be memorized or learned as sight words.
2. Teach sight words from one of the lists of the words most frequently used in reading materials, such as the 220 words of the *Dolch Basic Sight Word List* (Dolch, 1939) or *1,000 Instant Words* (Fry, 1994). Available from Teacher Created Materials, 6421 Industry Way, Westminister, CA, 92683, (800) 662-4321.

3. Teach XXXXXX to recognize the 300 Instant Words (Fry, 1980). These words make up approximately 65 percent of written material.
4. Assign the same list of words for reading and spelling. Have XXXXXX write, read, or read and write his sight/spelling words every day. Several times a week, she needs to see them in his reading assignments and use them in writing activities such as sentence dictation. When XXXXXX has read and spelled the word correctly for five consecutive days, fade practice to twice, then once a week, and eventually to once a month. Once XXXXXX has studied the word, subsequent writing of the word must be from memory. If she cannot write the word from memory correctly, XXXXXX needs additional practice.
5. Prior to reading, introduce and practice any unknown words with XXXXXX.
6. To promote automatic recognition of sight words, practice with rapid exposure. This may be done with brief exposures of words on index cards, a simple tachistoscope, or a computer. Expose the word for progressively decreasing periods of time.
7. To help XXXXXX generalize sight word recognition to text, have her scan printed material and name and cross out target sight words she recognizes. *Word Tracking: High Frequency Words* (Kratoville, 1989), a book of tracking worksheets using the Francis-Kucera list of the 1,092 most frequently used words in English, is appropriate for this type of activity (Kucera & Francis, 1967).

#### Strategies for Sight Word Instruction

1. Because XXXXXX has difficulty with memory, teach sight words using the Fernald method (Fernald, 1943) or the modified Fernald method. Important elements of these methods are repeatedly tracing the word while saying it, then writing it from memory.
2. When teaching sight words, directly teach XXXXXX to recognize common letter patterns within the word (e.g., ight in sight, oo in look). Reinforce automatic recognition of the letter pattern by giving practice finding it in other words and in discriminating it from similar patterns. For example, given a page of words containing oo, have her track across each line, circling oo. Later, have her circle oo on a similar worksheet comprised of words that incorporate oo as well as vowel combinations similar to oo such as ou.
3. Use a modified letter cloze procedure to help XXXXXX with word identification. Write the whole word on the front of an index card and then rewrite the word on the back of card, deleting all the vowels. After showing XXXXXX both sides twice, have her identify the word and the missing vowels.

4. To increase XXXXXX's word recognition, use patterned language books that repeat words and phrases. If XXXXXX does not retain the words introduced in these books, provide additional practice with flash cards. If she continues to have difficulty with retention, incorporate a tracing component.
5. Use a modified language experience approach (Bos & Vaughn, 1991) to help XXXXXX establish a positive attitude toward reading, reinforce his understanding that printed words represent spoken language, and increase sight vocabulary.
6. Have XXXXXX develop electronic flash cards for sight word practice.

*Reading Practice in Decodable Text*

1. Provide daily reading practice in decodable text (text based on a controlled vocabulary with many presentations of the sight words and reading/spelling patterns taught and in the same sequence). XXXXXX must read decodable text to integrate new and previously learned subskills into meaningful and connected text as well as to develop automaticity in word attack and sight word identification in multiple contexts. Regular basal texts or trade books are not effective for this purpose, as they do not provide a controlled vocabulary with sufficient presentations of specific reading and spelling patterns in a specific sequence.
2. Combine phonics instruction with a reading program that uses decodable text. Decodable text is reading material that is composed primarily of words with regular sound-symbol correspondence. Reading decodable text provides the opportunity for application of newly learned skills and generalizing skills learned in isolation to practical use.
3. Set aside at least 15 minutes every day for XXXXXX to read decodable text. Decodable text is reading material comprised of the phonics and sight words she has already learned. Reading decodable text provides the opportunity for application of newly learned skills, reinforcement of sight words, and transitioning skills learned in isolation to practical use. At his current skill level, reading aloud is best.
4. Supplement XXXXXX's phonics instruction with additional decodable books that she can read during free reading time and at home. Examples of the series available from educational publishers are the Steck-Vaughn Phonics Readers (Steck-Vaughn), SRA Reading Series (SRA/McGraw-Hill), Decodable Books (The Wright Group), J & J Language Readers (Sopris West), Phonics-Based Chapter Books (High Noon), and Scholastic Phonics Readers (Scholastic).
5. Use direct instruction for teaching phonics and then have XXXXXX apply the skills in decodable text formats. The use of controlled vocabulary will help XXXXXX practice the skills that she is learning.
6. Set aside at least 15 minutes every day for XXXXXX to read decodable text. At his current skill level, reading aloud is best.

7. Use paired reading to provide practice in reading decodable text. Pair up XXXXXX with another student another student at a similar reading level may take turns reading aloud to each other. Each student is responsible for making sure that what his partner reads makes sense and for stopping her if it does not.

### **Organization**

XXXXXX would benefit from developing better organization skills. Prior to commencing a task, XXXXXX should be asked to think about what will be needed in order to complete it, including not only materials but also all steps necessary for task completion.

1. XXXXXX should keep a well-organized routine to reduce stress and enhance memory and recall of daily activities.
2. XXXXXX should use a calendar and planner each day, so that she may work on planning ahead and organizing his time.
3. She may use Post-it notes to write notes about particularly important events. The Post-its can be placed by the front door where they are easily viewed before leaving the house each day.
4. XXXXXX's parents can also use Post it notes to remind her of events.
5. The family may want to install a white-board in a family area and write reminders on this. XXXXXX can be encouraged to write things on the board, as the act of writing aids memory.

### **Developing Self-Advocacy in Older Students**

1. Learn as much about ADHD as possible from reliable sources and consider how it affects you.
2. Have XXXXXX schedule private meetings with her academic teachers periodically to check on her academic status and to discuss any accommodations she might need at that time. This arrangement will help her stay on top of her course work as well as demonstrate to her teacher that she is motivated.
3. Request a meeting with any teacher who assigns multiple, simultaneous assignments or who has them listed on the course syllabus. Explain your difficulty with this type of assignment and suggest an alternative arrangement to complete them sequentially.

Respectfully submitted,

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