

# Neurobehavioral Status Exam/Neuropsychological Testing/Psychological Testing Service Delivery Documentation

**Student:** \_\_\_\_\_

**Date and time of Exam/Test:** \_\_\_\_\_

**Please select only one of the following tests:**

- Neurobehavioral Status Exam
- Neuropsychological Testing: Limited to no more than seven (7) hours (including testing and assessment) e.g., Halstead-Reitan Battery, Weschler Memory Scales, Wisconsin Card Sorting or other comparable neuropsychological battery. This is to be used only when there is a question of a neuropsychological and cognitive deficit.
- Psychological Testing – Limited to no more than 4 hours, except for the following:
  - Testing for intellectual level** – Limited to no more than two (2) hours for each test.
  - Self-administered test** – Limited to thirty (30) minutes. The following tests are considered self-administered, and include but are not limited to:
    - Achenbach Child Behavior Checklist
    - Adult Adolescent Parenting Inventory
    - Child Abuse Potential Survey
    - Connor’s Rating Scales
    - Parenting Stress Index
    - Piers-Harris Self Concept Scale
    - Reynolds Children’s Depression Scale
    - Rotter Incomplete Sentences Blank
    - Shipley Institutes of Living Scale
    - Fundamental Interpersonal Relations Orientation Scale-Behavior (FIROB)

**Please indicate duration of service:**

**Administration of Test** – Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Interpretation of Test (Psychologist and Physician only) – Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Preparation of Test Reports (Psychologist and Physician only) - Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Total duration: \_\_\_\_\_

Signature of Psychological Services Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name of Psychological Services Provider: \_\_\_\_\_

Credentials: \_\_\_\_\_

Resulting ICD-10 diagnosis(/es): \_\_\_\_\_