

Three Cases Demonstrating the Comprehensive Assessment of ADHD

שלושה מקרים המדגימים את ההערכה המקיפה של הפרעות קשב וריכוז

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Ashlyn: ADHD? (Age 13)

- Ashlyn has a history of difficulty remaining focused in the classroom.
- Her school work is often incomplete despite the fact that she appears advanced academically.
- Ashlyn struggles with peers.
- Within the home setting she is quick to become emotional and act in an oppositional manner.
- Her therapist raised concerns that she may experience a broader range of problems possibly related to ADHD and/or Autism Spectrum Disorder.

Ashlyn: Family History

- Ashlyn has an older sibling, Rayne. Rayne has a history of depression.
- Father completed high school and is a local truck driver.
- Mother completed a Bachelor of Science and works as a social worker. She noted an extended family history of depression.

Ashlyn: Development

- Ashlyn presented as a normal infant but had a difficult time being comforted.
- As a toddler she was extremely active and easily distracted.
- She had a difficult time adapting to new situations.
- She was often irritable but generally demonstrated extremes of emotions, either happy or mad.
- She appeared sensitive to sound.
- Persistence and attention varied.
- Ashlyn met developmental milestones early or within normal limits.

Ashlyn: Development

- Though she talks excessively about favorite topics, she appears to be able to converse normally.
- She has a strong negative reaction to change in routine, is disorganized and inattentive.
- Her coordination appears generally average.
- She is not particularly athletic.
- Ashlyn's mother noted that she appears to understand directions and situations "well if she is paying attention."
- Intellectually she appears above average.
- Ashlyn's kindergarten teacher was concerned that she was not emotionally ready for kindergarten.
- She appears to be above grade level academically.
- She has difficulty completing and turning in work.

Ashlyn: Social

- Ashlyn has few friends.
- She is not invited to parties.
- She does not have a best friend.
- As she becomes older she interacts less and less well with peers.
- Ashlyn complains that she does not have very many friendships.
- She doesn't appear to benefit from experience.

Ashlyn: Attention and Behavior

- At home, Ashlyn is easily distracted.
- She has difficulty sustaining attention and following instructions.
- Ashlyn has a history of frustrating easily, particularly with transition or changing tasks, stopping something or doing what she does not want to do. This pattern has improved but still occurs several times per week.
- Ashlyn's mother noted "we have adapted to her and we don't ask much." Ashlyn reportedly has a history of outbursts that could last for hours. For the most part she is not disruptive.
- Ashlyn works for short term rewards but has a difficult time working for long term rewards.

Ashlyn: Broad Spectrum Data (CBRS)

Scale	T-score Outlines			Statistically Significant Differences
	P parent	T1 4 th grade	T2 5 th Grade	
ADHD Predominantly inattentive Presentation	60 Very Elevated	53 Average	75 Very Elevated	P > T1; T2 > T1
ADHD Predominantly hyperactive- impulsive Presentation	69 Elevated	44 Average	43 Average	P > T1; P > T2
Conduct Disorder	51 Average	49 Average	40 Average	No significant differences
Oppositional Defiant Disorder	64 Very Elevated	72 Very Elevated	40 Average	P > T1; P > T2; T1 > T2
Major Depressive Episode	66 Very Elevated	90 Very Elevated	68 Elevated	T1 > T2; P > T2
Manic Episode	70 Very Elevated	70 Very Elevated	15 Average	P > T2; T1 > T2
Generalized Anxiety Disorder	79 Very Elevated	80 Very Elevated	65 Elevated	T1 > P; T1 > T2; P > T2
Separation Anxiety Disorder	46 Average	45 Average	48 Average	No significant differences
Social Anxiety Disorder (Social Phobia)	54 High Average	57 Average	56 Average	No significant differences
Obsessive- Compulsive Disorder	48 Average	90 Very Elevated	47 Average	T1 > T2; T1 > P
Autism Spectrum Disorder	74 Very Elevated	48 Average	74 Very Elevated	P > T1; T2 > T1

Ashlyn: Narrow Spectrum Data (ASRS)

Scale		P	T1	T2	Significant Differences Between Raters
TOTAL SCORE					
Total Score	T-score	82	49	80	P > T1; T2 > T1
	90% CI	59-84	46-52	57-82	
	Percentile	86	46	84	
ASRS SCALES					
Social/ Communication	T-score	66	49	84	P > T1; T2 > T1
	90% CI	62-69	46-53	80-87	
	Percentile	85	46	92	
Unusual Behaviors	T-score	57	52	52	No significant differences
	90% CI	53-60	48-56	48-56	
	Percentile	76	58	58	
Self-Regulation	T-score	81	45	80	P > T1; T2 > T1
	90% CI	56-85	41-49	56-83	
	Percentile	86	31	84	
DSM-5 SCALE					
DSM-5 Scale	T-score	61	48	58	P > T1; T2 > T1
	90% CI	57-64	45-52	54-61	
	Percentile	86	42	79	

Issue	P	T1	T2	Significant Difference between Ratios
	(10/2019)	(10/2019)	(10/2019)	
Attention	Standard Score	111	84	
	90% CI	106-115	82-81	
	Percentile Rank	72	37	11 + T2, P
	EFSEW			
	Standard Score	79	104	
Emotion Regulation	90% CI	72-86	97-119	11 + P*
	Percentile Rank	7	61	12 + P
	EFSEW			
	Standard Score	72	118	11
	90% CI	67-80	109-124	11 + T2, P
Flexibility	Percentile Rank	33	88	22 + P
	EFSEW			
	Standard Score	81	118	83
	90% CI	76-87	112-123	11 + T2, P
	Percentile Rank	58	93	
Inhibitory Control	EFSEW			
	Standard Score	78	108	73
	90% CI	68-82	95-112	11 + T2, P
	Percentile Rank	2	60	
	EFSEW			
Initiation	Standard Score	71	108	
	90% CI	66-76	95-112	Weakness
	Percentile Rank	7	60	
	EFSEW			
	Standard Score	71	108	
Organization	90% CI	66-76	95-112	11 + T2, P
	Percentile Rank	5	62	
	EFSEW			
	Standard Score	77	112	
	90% CI	72-80	105-117	11 + T2, P
Planning	Percentile Rank	57	84	12 + P
	EFSEW			
	Standard Score	70	114	80
	90% CI	65-75	109-120	11 + T2, P
	Percentile Rank	42	79	21 + P
Self-Monitoring	EFSEW			
	Standard Score	88	119	11
	90% CI	83-93	109-129	11 + T2, P
	Percentile Rank	2	61	12 + P
	EFSEW			
Working Memory	Standard Score	86	118	
	90% CI	80-96	112-124	88-97
	Percentile Rank	55	94	
	EFSEW			
	Standard Score	86	118	11 + T2, P

Scale	Parent 1/6/2019	Teacher 1 8/16/2019	Teacher 3 10/9/2019	Significant Differences Between Ratios
School	Teacher 60	47	49	
Classification	Considerable Impairment	No Impairment	No Impairment	P > T2 & T1; T2 > T1
Social	Teacher 73	49	77	
Classification	Considerable Impairment	No Impairment	Considerable Impairment	T2 > T1; P > T1
Mobility	Teacher 55	49	60	
Classification	No Impairment	No Impairment	Mild Impairment	T2 > T1
Domestic	Teacher 71	Domestic scale does not appear on the Teacher Form	Domestic scale does not appear on the Teacher Form	No comparison possible
Classification	Considerable Impairment			
Family	Teacher 69	Family scale does not appear on the Teacher Form	Family scale does not appear on the Teacher Form	No comparison possible
Classification	Moderate Impairment			

Scale	Parent 10/6/2019	Significant Differences Between Parents	Teacher 1 5/10/2019	Teacher 2 10/9/2019	Significant Differences Between Teachers
	T-scores 76		48	74	
Total Score	Classification Considerable Impairment	No comparison possible	No Impairment	Considerable Impairment	T2 > T1

- Ashlyn, a youth of average size and appearance, was well-groomed and neatly dressed.
- Eye contact was good.
- Ashlyn maintained and initiated conversation. Receptive and expressive language skills appeared good.
- Ashlyn was neither anxious or sad. Overall she was calm and emotionally stable.
- Ashlyn was alert, attentive and concentrated well.
- She shared joint attention. Body and object use as well as visual and listening response were normal.
- No atypical sensory behaviors were observed.
- Instrumental and informative gestures, as well as quality of social overture, social response and reciprocal social communication were good.
- Ashlyn was cooperative and attempted all tasks presented. She was motivated to perform and persistence was good.

Ashlyn: Test Scores (CAS 2)

I.Q. (Mean = 100; SD = 15)	
Planning	100
Simultaneous	108
Attention	102
Successive	110
EF without Working Memory	97
EF with Working Memory	100
Working Memory	103
Verbal Content	102
Nonverbal Content	108
Speed Fluency Index	94
FULL SCALE	106
Visual-Auditory Comparison - Not significant	

Ashlyn: Test Scores (Woodcock Cognitive)

Scores (mean = 100; SD = 15)	
SHORT TERM WORKING MEMORY	111
Verbal Attention	111
Letter-Pattern Matching	108
COGNITIVE PROCESSING SPEED	82
Number Pattern Matching	88
Pair Cancellation	80
NUMBER FACILITY	100
Numbers Reversed	108
Number-Pattern Matching	95
PERCEPTUAL SPEED	91
Letter-Pattern Matching	88
Number-Pattern Matching	95
COGNITIVE EFFICIENCY	95
Letter Pattern Matching	88
Numbers Reversed	108
COGNITIVE EFFICIENCY EXTENDED	98
Verbal Attention	111
Letter-Pattern Matching	88
Numbers Reversed	108
Number-Pattern Matching	95

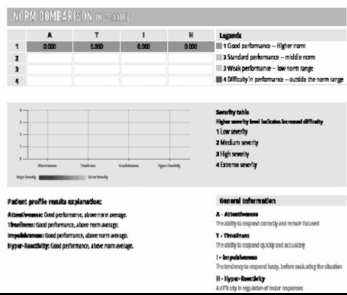
Ashlyn: Memory (CHAMP)

Standard Score (mean = 100; SD = 15)	
Verbal Memory Index	100
Visual Memory Index	78
Immediate Memory Index	85
Delayed Memory Index	89
Total Memory Index	87

Ashlyn: Achievement (Woodcock)

		Standard Scores (mean = 100; s.d. = 15)
READING		112
Letter/Word Identification		122
Passage Comprehension		95
BROAD READING		108
Letter-Word Identification		122
Passage Comprehension		95
Sentence Reading Fluency		104
BASIC READING SKILLS		118
Letter-Word Identification		122
Word Attack		109
MATHEMATICS		103
Applied Problems		107
Calculation		98
BROAD MATHEMATICS		100
Applied Problems		107
Calculation		98
Math Facts Fluency		96

Ashlyn: MOXO



Ashlyn: Anxiety (MASC)

MASC 2 Total Score			
Scale	Raw Score	T-score	Guideline
MASC 2 Total Score	101	74	Very Elevated

MASC 2 Anxiety Probability Score		
Number of Elevations on Anxiety Scales	Probability	Guideline
2	High	There is a high probability that the youth has one or more anxiety disorders.

MASC 2 Scales			
Scale	Raw Score	T-score	Guideline
Anxiety Scales	Separation Anxiety/Phobias	11	Average
	GAD Index	18	Elevated
	Social Anxiety: Total	28	Very Elevated
	Humiliation/Rejection	15	Very Elevated
	Performance Fears	11	Very Elevated
Obsessions & Compulsions	21	73	Very Elevated
Physical Symptoms	Physical Symptoms: Total	18	Elevated
	Panic	7	Slightly Elevated
	Tension/Restlessness	9	Elevated
	Heart Awareness	22	Slightly Elevated

Ashlyn: Resilience (RS)

	(mean = 50; SD= 10)
Sense of Mastery	39
Sense of Relatedness	29
Sense of Emotional Reactivity	61
Resilience	28
Vulnerability	73

Ashlyn: Personality (Millon)

- This profile is characteristic of youth who may be shy, sensitive, introverted and cautious.
- Such youth become more interactive and self-revealing as they feel more comfortable with others.
- Such youth often experience anxiety.
- They worry about social relationships and typically as they enter adolescents are concerned about how they are perceived by others.
- The Millon profile is characteristic of youth experiencing broad symptoms of anxiety.

Ashlyn: Diagnostic Summary

Ashlyn's presentation at this time meets the DSM-5 diagnostic criteria for:

- Generalized Anxiety Disorder
- Unspecified Depressive Disorder (provisional)
- Social Pragmatic Communication Disorder (provisional)

Merrill: Traumatic Brain Injury (Age 61)

- On August 28, 2019, Merrill was involved in an automobile accident.
- He suffered physical injuries which by report have caused cognitive, physical and emotional symptoms impairing daily functioning.
- He was referred by his attorney.
- The attorney is representing Merrill in his efforts to recover for his injuries.
- The examiner was asked to complete a full neuropsychological evaluation.

Merrill: Injuries

- Subarachnoid hemorrhage. Repeat head CT in the morning. Monitor his neuro exam closely overnight. No neurosurgical consult needed at this time.
- Fracture of nasal bone. Minimal displacement. We will treat pain as needed.
- Facial lacerations, bridge of nose and forehead. Sutured in the emergency department prior to my arrival. Patient has been admitted to T11 for careful monitoring of his neuro exam and repeat head CT in the morning.

Merrill: Post Accident Headaches

- Merrill reported mild post-accident headaches two to three times per week that are experienced as a 2-3/10 as a dull ache.
- They do not interfere with activities. Sometimes Merrill will wake with a headache. He denied a pre-accident headache history

Merrill: Family of Origin

- His parents have both since passed away.
- His mother was a housewife, having earned a high school diploma.
- His father was an engineer, earning a Masters Degree.
- Merrill is the second of six children.
- All of his siblings have passed away from heart failure.
- He has one brother who is still alive who lives in Las Vegas

Merrill: Education and Immediate Family

- Merrill received a Bachelor of Science from Brigham Young University in 1979, reporting that he was a C student.
- He received a Masters in Public Administration from Brigham Young University in 1988.
- He has been married to his wife, Linda, for fifty-two years.
- They have six biological children, ranging in age from forty to fifty-one years.

Merrill: Medical History

- Merrill broke his humerus in a small airplane accident in 1964 with his father.
- He fell off a roof in 1998 and suffered facial damage but no concussion.
- He was diagnosed with gout in 2004.
- He acknowledged that he was bitten by two dogs approximately eight to ten years ago. He was carrying a licensed concealed weapon and shot both dogs.
- He had his gallbladder removed in 2001 and a testicle removed due to cancer in 2003.
- He had his prostate removed due to cancer in 2005.
- Merrill is currently taking multiple medications. He reported he was taking all of these medications at the time of the accident.

Merrill: Employment

- Merrill is retired.
- He was in the military as a chief warrant officer for eighteen years.
- Merrill reported that he was a "special agent in counter intelligence." He reported serving specific "missions" in many parts of the world over eighteen years.
- He worked for Salt Lake City in the Planning Department for thirty years taking care of bringing cases to the Board of Adjustment and Commission for approval.
- Prior to that he worked as a carpenter for two years and a mold maker.

Merrill: Daily Activities

Merrill's responses to the Barkley Functional Impairment Scale placed him at the following age-adjusted percentiles (50th percentile is average; high scores indicate problem):

	Percentile
Home/Family	1 st - 50 th
Home/Chores	1 st - 50 th
Work	n/a
Social/Strangers	51 st - 75 th
Social/Friends	51 st - 75 th
Community Activities	1 st - 50 th
Education	n/a
Marriage/Cohabiting/Dating	76 th - 84 th
Money Management	1 st - 50 th
Driving	1 st - 50 th
Sexual Relations	76 th - 84 th
Daily Responsibilities	1 st - 50 th
Self-Care Routine	1 st - 50 th
Health Maintenance	1 st - 50 th
Child Rearing	n/a
Mean Impairment Score	1 st - 50 th
Percent Domains Impaired	1 st - 50 th

Merrill: Executive Functioning

Table 1: Executive Functioning				
Scale	Observed Score (0-100)	Self-Report Score (0-100)	Significant Difference Between Scores	
Executive Function	79	100	SE > 0	
Classification	Below Average	Average		
Table 2: Executive Functioning - Subdomains				
Subdomain	Observed Score (0-100)	Self-Report Score (0-100)	Significant Difference Between Scores	
Attention	95	100	No significant difference	
Classification	Average	Average		
Working Memory	95	95	SE > 0	
Classification	Below Average	Average		
Flexibility	95	100	SE > 0	
Classification	Below Average	Average		
Initiation	95	100	SE > 0	
Classification	Below Average	Average		
Organization	95	100	SE > 0	
Classification	Below Average	Average		
Planning	95	100	SE > 0	
Classification	Below Average	Average		
Self-Monitoring	95	100	SE > 0	
Classification	Below Average	Average		
Working Memory	95	100	SE > 0	
Classification	Below Average	Average		

Merrill:
Neuropsychology
Data

Woodcock-Johnson IV: Tests of Cognitive Abilities, Processing Speed and Efficiency	
	Standard Scores (mean = 100; s.d. = 15)
GENERAL INTELLECTUAL ABILITIES	108
Oral Vocabulary	110
Number Series	112
Verbal Attention	98
Letter-Pattern Matching	84
Phonological Processing	115
Story Recall	114
Visualization	123
SHORT TERM WORKING MEMORY	103
Verbal Attention	98
Letter-Pattern Matching	107
COGNITIVE PROCESSING SPEED	88
Number Pattern Matching	84
Pair Cancellation	91
NUMBER FACILITY	93
Numbers Reversed	107
Number-Pattern Matching	87
PERCEPTUAL SPEED	85
Letter-Pattern Matching	84
Number-Pattern Matching	87
VOCABULARY	109
Oral Vocabulary	110
Picture Vocabulary	107
COGNITIVE EFFICIENCY	93
Letter-Pattern Matching	84
Numbers Reversed	107
COGNITIVE EFFICIENCY EXTENDED	91
Verbal Attention	98
Letter-Pattern Matching	84
Numbers Reversed	107
Number-Pattern Matching	87

Merrill: Language

Woodcock-Johnson IV: Tests of Oral Language	
	Standard Scores (mean = 100; s.d. = 15)
ORAL LANGUAGE	109
Picture Vocabulary	107
Oral Comprehension	109
BROAD ORAL LANGUAGE	106
Picture Vocabulary	107
Oral Comprehension	109
Understanding Directions	99
LISTENING COMPREHENSION	105
Oral Comprehension	109
Understanding Directions	99
VOCABULARY	109
Picture Vocabulary	107
Oral Vocabulary	110

Merrill: Memory

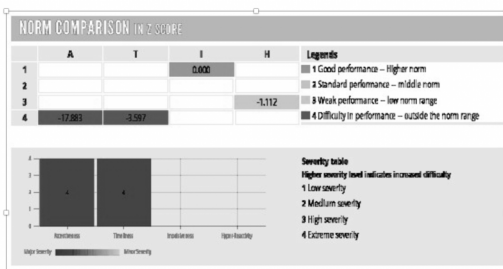
Wechsler Memory Scale		
	Scaled Scores (mean = 10; s.d. = 3)	
Logical Memory I	9	
Logical Memory II	11	
Verbal Paired Associates I	15	
Verbal Paired Associates II	13	
Visual Reproduction I	12	
Visual Reproduction II	8	
	(mean = 100; s.d. = 15)	Percentiles
Auditory Memory	112	79 th
Visual Memory	100	50 th
Immediate Memory	112	79 th
Delayed Memory	104	61 st

Merrill: Academic

Woodcock Johnson IV: Tests of Academic Achievement
 Standard Scores
 (mean = 100; s.d. = 15)

READING	109
Letter/Word Identification	106
Passage Comprehension	111
BROAD READING	107
Letter-Word Identification	106
Passage Comprehension	111
Sentence Reading Fluency	103
BASIC READING SKILLS	106
Letter-Word Identification	106
Word Attack	105
MATHEMATICS	112
Applied Problems	111
Calculation	112
BROAD MATHEMATICS	104
Applied Problems	111
Calculation	112
Math Facts Fluency	90
MATH CALCULATION SKILLS	100
Calculation	112
Math Facts Fluency	90

Merrill: MOXO



Merrill: Diagnostic Conclusions

- Based on the records reviewed, Merrill's history and current testing, it appears the accident of August 28, 2019 has mildly impacted Merrill's cognitive efficiency and processing speed, leading to some difficulty with attention and hyper-reactivity.
- These weaknesses, based on Merrill's report, have not adversely impacted his everyday functioning.
- His wife reports challenges with emotional regulation which may reflect an exacerbation of pre-existing challenges.

Tessai: ADHD? (Age 11)

- Tessei has been diagnosed and treated for ADHD with refractory response.
- Parents are concerned, however, that his presentation may reflect other possible causative factors.
- An in-depth evaluation was recommended in an effort to better understand and define current issues as well as assist with treatment planning.
- Tessei was evaluated by a nurse practitioner and reported to have ADHD. Medicine was tried for a week.
- Tessei thought it helped him focus. However, his teacher did not observe significant improvements

Tessai: History

- Tessei's mother completed college.
- His biological father completed a GED. His father evidently has a history of emotional challenges.
- Concerns were raised about extended family members on father's side of the family experiencing social and behavioral problems.
- Tessei sees his father every other weekend. His father does not provide child support. His mother and stepfather do not have any contact with him.

Tessai: Development

- Tessei's mother and stepfather, Mike, were seen to review Tessei's social and developmental history.
- They described Tessei as impulsive.
- He tends to be a repeat offender.
- Rewards and punishments do not seem to make an impact.
- At times it appears Tessei does not possess remorse.

Tessai: Development

- Tessei's medical history is unremarkable.
- He settles down to sleep and usually sleeps through the night without disruption.
- He is not currently taking any medications on an ongoing basis.
- His appetite is adequate.
- Tessei met developmental milestones normally.
- He was somewhat late in beginning to speak. He talks excessively about favorite topics that hold limited interest to others.
- He can be literal in his conversation or ask irrelevant questions. Tessei at times can avoid eye contact. He does not appear to understand social behavior and misses social cues.
- Tessei engages in obsessive behavior.
- He is disorganized and inattentive.

Tessai: Development

- Tessei's coordination was rated as average.
- Tessei appears to be intellectually advanced.
- He understands directions as well as others but tends to be a repeat offender because he misses cues. He does not "focus on tasks at hand."
- Tessei appears to be on a sixth grade level for spelling, seventh grade level for arithmetic and ninth grade level for reading."
- He has never repeated a grade. He is in the seventh grade now.
- He has had problems paying attention in class. He tends to fall behind quickly and then makes slow progress.

Tessai: Social

- Tessei had a best friend. He recently moved away.
- Tessei tends to not be invited to social activities such as parties.
- Nonetheless, he has always had some friends.
- He usually plays well with others.
- He may have a difficult time in groups "when the focus isn't on him." He may seek attention to the point of "annoying people."

Tessai: Broad Symptom Parent Data

Scale	Raw Score	T-score	Guideline
ADHD Predominantly Inattentive Presentation	27	90	Very Elevated Score (Many more concerns than are typically reported)
ADHD Predominantly Hyperactive-Impulsive Presentation	18	85	Very Elevated Score (Many more concerns than are typically reported)
Conduct Disorder	8	90	Very Elevated Score (Many more concerns than are typically reported)
Oppositional Defiant Disorder	8	85	Elevated Score (More concerns than are typically reported)
Major Depressive Episode	15	90	Very Elevated Score (Many more concerns than are typically reported)
Manic Episode	10	90	Very Elevated Score (Many more concerns than are typically reported)
Generalized Anxiety Disorder	17	90	Very Elevated Score (Many more concerns than are typically reported)
Separation Anxiety Disorder	6	80	Very Elevated Score (Many more concerns than are typically reported)
Social Anxiety Disorder (Social Phobia)	3	51	Average Score (Typical levels of concern)
Obsessive-Compulsive Disorder	4	90	Very Elevated Score (Many more concerns than are typically reported)
Autism Spectrum Disorder	13	79	Very Elevated Score (Many more concerns than are typically reported)

Tessei: Parent EF Data

Full Scale							
Standard Score	90% Confidence Interval		Percentile Rank	Classification			
75	71-76		4	Below Average			
CEPI Scales							
Scale	Standard Score	90% Confidence Interval	Percentile Rank	Classification	Difference from Youth's Average (75.9)	Statistically Significant? (p < .05)	Executive Function Strength/Weakness
Attention	70	74-87	8	Below Average	3.1	No	-
Attention Regulation	91	84-98	27	Average	16.1	Yes	-
Flexibility	80	74-82	8	Low Average	4.1	No	-
Inhibitory Control	70	74-89	8	Below Average	3.1	No	-
Initiation	78	73-88	7	Below Average	2.1	No	-
Organization	77	72-85	6	Below Average	1.1	No	-
Planning	70	66-79	2	Below Average	-5.9	No	-
Self-Monitoring	70	66-81	2	Below Average	-5.9	No	-
Working Memory	59	56-71	1	Well Below Average	-16.9	Yes	Weakness

Tessei: Impairment

Scale	T-score (90% CI)	Percentile Rank	Classification	Interpretive Guideline
School	84 (76-88)	99	Considerable Impairment	Considerable level of impairment in acquiring and applying knowledge at school.
Social	65 (58-69)	95	Moderate Impairment	Moderate level of impairment for activities such as interacting, socializing, and communicating with others.
Mobility	66 (58-69)	95	Moderate Impairment	Moderate level of impairment when physically moving, such as running, kneeling, etc.
Domestic	66 (58-69)	95	Moderate Impairment	Moderate level of impairment in the ability to do household tasks.
Family	51 (44-58)	54	No Impairment	No impairment indicated.

Total Score

The Total Score should be used as a general indication of overall impairment.

Scale	T-score (90% CI)	Percentile Rank	Classification	Interpretive Guideline
Total Score	72 (67-78)	99	Considerable Impairment	Considerable level of overall impairment.

Tessei: Risks and Strengths

SCORES				
Response Validity Scales		Raw score		Interpretive range
Inconsistent Responding (INC)		1		Valid response style
Impression Management (IMP)		16		Valid response style
Primary Scales		Raw score	T-score	Percentile
Risk Summary (RSK)		4	43	24
Strength Summary (STR)		54	46	34
RISE Index		53	52	58
Strength Subscales		Raw score	T-score	Percentile
Emotional Balance (EMO)		23	54	66
Interpersonal Skill (INT)		19	44	27
Self-Confidence (SCN)		12	39	14

Tessai: Neuropsychological Data

	I.Q. (mean = 100; s.d. = 15)	Percentile (mean = 50)	90% Confidence Interval
Planning	108	70 th	101-114
Simultaneous	124	95 th	117-128
Attention	98	45 th	91-106
Successive	102	55 th	95-109
EF without Working Memory	100	50 th	91-109
EF with Working Memory	101	52 nd	94-108
Working Memory	103	58 th	96-109
Verbal Content	100	50 th	93-107
Nonverbal Content	127	96 th	118-132
Speed Fluency Index	91	-	-
FULL SCALE	110	74 th	106-114

Visual-Auditory Comparison - Better auditory than visual

Tessai: Neuropsychological Data

Woodcock-Johnson IV: Tests of Cognitive Processing and Efficiency

	Standard Scores (mean = 100; s.d. = 15)
SHORT TERM WORKING MEMORY	90
Verbal Attention	117
Letter-Pattern Matching	71
COGNITIVE PROCESSING SPEED	101
Number-Pattern Matching	108
Pair Cancellation	95
NUMBER FACILITY	87
Numbers Reversed	71
Number-Pattern Matching	104
PERCEPTUAL SPEED	107
Letter-Pattern Matching	108
Number-Pattern Matching	104
COGNITIVE EFFICIENCY	90
Letter-Pattern Matching	108
Numbers Reversed	71
COGNITIVE EFFICIENCY EXTENDED	100
Verbal Attention	117
Letter-Pattern Matching	108
Numbers Reversed	71
Number-Pattern Matching	104

Tessei: Language

Peabody Picture Vocabulary Test - 5

Standard Score - 119
Percentile - 90th

Expressive Vocabulary Test - 3

Standard Score - 96
Percentile - 39th

Wechsler Intelligence Scale for Children - IV

	Scaled Scores (mean = 10; s.d.= 3)	
Verbal Comprehension		
Comprehension	12	
Information	11	
Word Reasoning	11	
	Standard Score (mean= 100; s.d= 15)	Percentile
Verbal Comprehension	106	66 th

Tessei: Memory

Child and Adolescent Memory Profile

		Scaled Scores (mean = 10; s.d.= 3)	
Lists		9	
Objects		8	
Instructions		12	
Places		6	
Lists Delayed		9	
Objects Delayed		9	
Instructions Delayed		11	
Places Delayed		7	
	Standard Score (mean = 100; s.d = 15)	Percentiles (mean = 50)	90% Confidence Interval
Verbal Memory Index	97	42 nd	89-105
Visual Memory Index	86	18 th	78-94
Immediate Memory Index	92	30 th	84-100
Delayed Memory Index	89	23 rd	79-99
Total Memory Index	90	25 th	83-97

Tessai: Achievement

ACADEMIC FLUENCY	103
Sentence Reading Fluency	107
Math Facts Fluency	98
Sentence Writing Fluency	99
ACADEMIC APPLICATIONS	101
Applied Problems	102
Passage Comprehension	95
Writing Samples	105
PHONEME GRAPHEME KNOWLEDGE	122
Word Attack	132
Spelling of Sounds	105
BRIEF ACHIEVEMENT	103
Letter-Word Identification	101
Applied Problems	102
Spelling	105
BROAD ACHIEVEMENT	103
Letter-Word Identification	101
Applied Problems	102
Spelling	105
Passage Comprehension	95
Calculation	102
Writing Samples	105
Sentence Reading Fluency	107
Math Facts Fluency	98
Sentence Writing Fluency	99

Tessai: MOXO



Tessai: Anxiety

MASC 2 Scales				
Scale		Raw Score	T-score	Guideline
Anxiety Scales	Separation Anxiety/Phobias	10	62	Slightly Elevated
	GAD Index	10	53	Average
	Social Anxiety: Total	11	52	Average
	Humiliation/Rejection	0	36	Low
	Performance Fears	11	77	Very Elevated
Obsessions & Compulsions		18	71	Very Elevated
Physical Symptoms	Physical Symptoms: Total	17	68	Elevated
	Panic	6	57	High Average
	Tense/Restless	11	81	Very Elevated
Harm Avoidance		13	45	Average

Tessai: Depression

Negative Self-Esteem	7	85 (78-94)	98	Very Elevated	The child may have low self-esteem, self-dishlike, and feelings of being unloved.
FUNCTIONAL PROBLEMS	16	90 (81-96)	99	Very Elevated	The child may be experiencing issues with ineffectiveness and interpersonal problems. Further analysis of the subscale scores will identify which kinds of functional problems are most evident.
Ineffectiveness	12	86 (76-97)	99	Very Elevated	The child may be evaluating his abilities and school performance negatively, and may be experiencing an impaired capacity to enjoy school and other activities.
Interpersonal Problems	6	90 (80-100)	99	Very Elevated	The child may have problems interacting with peers and may feel lonely and unimportant to his own family.

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Tessai: Personality Profile (Millon)

- On this instrument, Tessai endorsed a relative large number of problematic thoughts, feelings, and behaviors across a broad range of content compared to youth of his age.
- This didn't generate an extremely high score but may reflect that Tessai is feeling rather vulnerable.
- Youth with such a profile often struggle to transition from preadolescence to adolescence where they typically possess an affect of interpersonal instability.
- They are often unpredictable and impulsive in their behavior. They can be hypersensitive to rough and reckless if not mischievous emotionally.
- Such youth can be defiant or oppositional at times in relationships. They are often disinclined to do things that are requested of them. Such youth are prone to abrupt or angry outbursts. They often want to be center of attention.

Tessai: Diagnostic Conclusions

Tessai meets the DSM-5 diagnostic criteria for:

- Major Depressive Disorder
- Generalized Anxiety Disorder
- Oppositional Defiant Disorder (provisional)
- Attention-Deficit/Hyperactivity Disorder, Combined Presentation (provisional)



Questions?



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TEDx: <https://www.youtube.com/watch?v=isfw8JJ-eWM>
