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### CONFIDENTIAL RE-EVALUATION SUMMARY

**Child's Name:** Joey (Not His Real Name) Smith  
**Grade/School:** PK; Local Preschool

**Date of Birth:** XX/XX/XXXX  
**Date of Testing:** XX/XX/2019

#### **Background Information**

Joey Smith is a 6 year-old boy with a history of developmental delays. Joey initially received birth to 3 services starting at 11 months of age, followed by Early Childhood Special Education services starting at age 3. He has also received private services, and currently receives weekly occupational and speech-language therapy. Joey was first evaluated through this clinic in 2018. He was diagnosed with a mild developmental cognitive delay and his overall skills were at about the 1<sup>st</sup> to 2<sup>nd</sup> percentile for his age. Within the context of his developmental delay, Joey showed relative strengths in his abstract nonverbal reasoning skills, visual memory, social skills, and upbeat temperament. Joey showed relative weaknesses in his verbal cognitive skills, short-term memory, and language and literacy skills. Socially, Joey demonstrated strong social motivation, good nonverbal communication, emerging play skills, good ability to imitate, the ability to demonstrate joint attention, and frequent social approach behaviors, and he did not meet criteria for autism based on formal autism testing with the ADOS-2. I recommended follow-up evaluation in 1 year to monitor his progress and refine treatment planning.

#### **Interim History**

Per parent report, over the past year, "Joey's been making some progress, slow but steady" in his services. He has generally enjoyed good medical health over the last year, with no new medical concerns arising. He continues to be followed by an optometrist for strabismus. His parents reported "we're mostly interested in tracking progress" and in planning for the upcoming transition to kindergarten. Currently, the plan is for Joey to attend a combined pre-kindergarten and kindergarten classroom at a local Montessori school next year. Joey continues have a wide range of interests and has made 2 friends in his kindergarten classroom. He also enjoys walking and hiking.

#### **Tests Administered**

- Wechsler Intellectual Scale for Children, Fifth Edition (WISC-V)
- Clinical Evaluation of Language Fundamentals, Fifth Edition (CELF-5)
- Beery-Buktenica Developmental Test of Visual-Motor Integration, Sixth Edition (VMI)
- Bracken Basic Concepts Scale, Third Edition (Bracken-3)
- Behavior Assessment System for Children, Third Edition (BASC-3)
- Adaptive Behavior Assessment System, Third Edition (ABAS-3)

#### **Behavior Observations**

Joey presented as a well-groomed, casually dressed boy who appeared younger than his stated age. He has notable strabismus and his eye rotates inward on occasion. He was accompanied to this evaluation by his father. Joey was initially anxious upon introduction, and preferred to remain standing for the first 35 minutes of the test session. After about 4 or 5 minutes, Joey began gradually exploring the testing office. He began asking questions about the objects in the office and about me. He continued to be invited gently to begin the testing process, and at first he answered these queries by stating he would be ready "in a little while." After 35 minutes, he reported he was ready to begin testing and was able to transition quite successfully. During the remainder of the test session, Joey appeared to be in a cheerful mood, with a bright, congruent affect.

Throughout testing, Joey's speech was clear and fluent. However, he often struggled with understanding test instructions and my casual comments. He also had difficulty expressing his ideas. His language skills were generally more characteristic of a child between 3 and 4 years of age. Socially, Joey was friendly and polite during testing. He showed a strong social skills during testing. For example, he was very cooperative, enjoyed social praise and social rewards for his effort, and made good eye contact during testing. He was also able to use facial expressions and gestures to add meaning to his conversation, regularly shared information, and ask about my feelings and opinions frequently.

Based on observations, Joey's focus, short-term memory, and organization skills continue to be delayed. He displayed a slightly heightened level of activity for his age. During writing and drawing tasks, Joey's pencil-grip and handwriting seemed underdeveloped, but relative to last year, he appears to have made good progress in this area. He was able to draw straight lines, a circle, a square, a cross, and an X. On pre-academic tasks, Joey showed increased interest in recognizing letters relative to last year. No unusual motor movements were observed aside from the strabismus. Joey was a pleasure to interact with due to his enthusiasm and clear enjoyment of the social elements of the test session. His challenges with communication may have impacted his performance, as he may not always have understood the instructions for some task. That means some test results may underestimate his true abilities. However, as his parents report similar difficulties in other settings, the test results are believed to be accurate estimates of the level at which he is currently comfortable functioning.

### **Test Results**

Joey's evaluation results show his overall development continues to fall in the range associated with a global developmental delay. Currently, his cognitive skills are at the 1<sup>st</sup> percentile for his age (WISC-V Full Scale IQ = 64), which is the range associated with a mild intellectual disability. When comparing his current scores to his previous scores, while Joey continues to develop at a slower pace than his same-age peers, he appears to have made steady progress along his own trajectory. This is very encouraging, and suggests Joey is making slow but steady developmental gains with his current supports and services in place.

On the cognitive testing, Joey demonstrated a similar pattern to what was seen in 2018 (when he was given the WPPSI-IV a similar test to the WISC-V given during this evaluation). That is, Joey demonstrated a relative strength in his ability to use words to solve problems, compare and contrast ideas, and explain what he knows. He also showed relative strengths in his building skills and his ability to think abstractly about quantities. In all of these areas, Joey's skills were at about the 9<sup>th</sup> percentile for his age. These strengths suggest Joey is likely to be most successful with tasks that (1) use simple and clear language, (2) allow him to answer in 1-2 words, and/or (3) use manipulatives that he can see, touch, and interact with. Joey demonstrated relative weaknesses in his ability to solve visual puzzles, grasp patterns, keep information in his short-term memory, and work through tasks quickly and efficiently. His scores in these areas were at about the 1<sup>st</sup> percentile for his age. These scores suggest Joey may especially benefit from additional adult support during tasks that are highly abstract, complex, or fast-paced.

Previous testing conducted has consistently identified particular areas of need in Joey's language development and hand-eye coordination. He currently participates in speech-language and occupational therapy to address these needs, so it is important to document the progress he is making in these services. During this evaluation, Joey's test scores show that his language development continues to be delayed (CELF-5 Core Language = 64, 1<sup>st</sup> percentile). However, he is making slow but steady progress in this area. Age-equivalent scores on the language test suggest his language skills are now at about the 4 year-old age range. This represents nice improvement since 2018, when his age-equivalent scores for language were generally at the 3 year-old age range. Joey also appears to have made about a years' worth of progress in his pre-academic skills, which are now also at about the 4 year-old age range (Bracken-3 School Readiness Composite = 68, 1<sup>st</sup> percentile), up from the 3 year-old level one year ago. Perhaps most notably, Joey appears to have made especially strong progress in his hand-eye coordination. During this evaluation, he was able to perform at the 12<sup>th</sup> percentile for his age on a drawing task (VMI = 82). This level of performance is at about the 5 year-old age range, up from about the 3 year-old age range one year ago.

Joey's adaptive functioning skills, as rated by his parents, are consistent with his overall development. Adaptive functioning refers to what a child can do at home, at school, and in the community, in areas such as socializing, self-care, and assisting with daily tasks like dressing, feeding, and grooming. Joey's parents' ratings placed his adaptive functioning at the 1<sup>st</sup> percentile for his age and consistent with his cognitive functioning and level of language development (ABAS-3 General Adaptive Composite = 59). Again, this is within the level associated with a mild to moderate intellectual delay. However, within this context, Joey continues to show some nice areas of relative strengths. In particular, parent ratings and observations during this evaluation indicate Joey's strengths are his social skills, his nonverbal communication skills, and his sweet and engaging personality. When he is calm and comfortable, Joey is sweet, positive, upbeat, eager-to-please, and resilient.

From an emotional and behavioral perspective, parent ratings identified ongoing needs in the areas of attention, activity level, anxiety, and Joey's overall development. Although anxiety was a concern last year, I am concerned that his level of anxiety remains at a very high level this year. He is therefore at very risk for increased experience emotional distress as the expectations continue to increase. His parents are also reporting more challenges with concentration, self-regulation, impulse control, and other aspects of executive functioning as he matures and the expectations in these areas also increase.

## **Diagnostic Considerations**

Although he has a number of strengths, Joey's overall development continues to be delayed. His level of overall development meets criteria for a mild **Developmental Cognitive Delay** (DCD). DCD is diagnosed when a child's overall *cognitive skills* (thinking and learning abilities) and *adaptive skills* (what he can do at home and at school, in areas like communicating, socializing, and self-care) are both at about the 1<sup>st</sup> to 2<sup>nd</sup> percentile for his chronological age. This diagnosis is sometimes also called Intellectual Disability (ICD10 Code F70), or developmental delay (DSM-V Code 783.40). While Joey appears to be very well-supported in his current services and school setting, his parents' ratings raise some concerns that he is experiencing more emotional distress as the expectations increase as he matures. Joey's current level of anxiety currently meets criteria for a diagnosis of a nonspecific **Anxiety Disorder** (Anxiety Not Otherwise Specified). His parents' ratings also suggest he is increasingly at risk for meeting criteria for an attention disorder as the expectations for concentration, self-regulation, and other aspects of executive functioning continue to increase as he matures.

## **Recommendations**

1. While children with a DCD can certainly learn new skills, make friends, and build on their strengths, children with a DCD need more time, more support, and more direct instruction to meet their cognitive, academic, and social milestones. In the school setting, children with a DCD thrive when taught concrete academic and functional skills through direct, structured instruction. These students typically require a program that moves at their unique pace, and that focuses on rote learning through repetition, practice, and positive reinforcement. Joey's profile continues to suggest he will especially benefit from multisensory and concrete instructional methods that he can see, touch, and interact with, social learning methods (e.g., watching others), and opportunities to be a role model and to demonstrate his strengths.
2. Based on these test results, I am optimistic that the Montessori program under consideration (or a highly concrete, personalized approach in another school setting) will be a good fit for Joey's needs. I am especially encouraged that Joey has shown an increased interest in early academic activities such as recognizing letters. I expect he will thrive in a pre-kindergarten/kindergarten classroom, if the environment can be specially tailored to his developmental and social-emotional needs. In any environment that Joey is in, he is likely to need a high level of structure, multisensory cues (e.g. pictures), a slow pace that does not overwhelm him when introduced to new activities, brief lessons that do not exceed his attentional capacities, and adult support that helps him self-regulate. Ongoing consultation with his OT and SLP providers and/or with a child behavior specialist focusing on how to build those skills in the school setting (and at home) may be helpful.
3. Outside of the school setting, Joey will certainly continue to benefit from occupational therapy and speech/language therapy. His profile suggests that the following services be added to his treatment plan to ensure all of his needs are being met:
  - o Play therapy focusing on developing his social skills (given that this is one of Joey's best way of taking in new information and meeting his needs, so developing this strength to the fullest extent possible is recommended) and on strengthening his emotion coping skills
  - o Extended school year services given that Joey is at risk for regression during long breaks
  - o Strategies that support his emerging executive functioning skills
4. Joey's family are encouraged to share the results of this evaluation with his pediatrician. If needed, medication options to support his emotional well-being and attention/executive functioning could be considered as part of a comprehensive treatment plan. Continuing to support his physical health through regular exercise, continued good nutrition, and develops good sleep habits are all recommended, as research has shown that these lifestyle factors support the development of neurocognitive and emotional health in childhood.

If you have questions, feel free to contact me at (360) 334-6156.



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## NEURODEVELOPMENTAL EVALUATION

### CONFIDENTIAL TEST RESULTS

Note: These confidential test scores are included solely for the convenience of other appropriately licensed professionals who may work with Joey. These scores are not meant to be interpreted by individuals without training in assessment. These scores also should not be interpreted without consideration of the narrative body of this report. Shaded scores are from Joey's previous (2018) evaluation.

#### COGNITIVE FUNCTIONING

##### Wechsler Intellectual Scale for Children, Fifth Ed.

<u>Index</u>	<u>2019 SS</u>	<u>2018 SS</u>
Verbal Comprehension	78	77
Visual Spatial	69	61
Fluid Reasoning	69	69
Working Memory	62	74
Processing Speed	53	66
Full Scale IQ	64	69

  

<u>Subtest</u>	<u>2019 Scaled</u>
Similarities	6
Vocabulary	6
Block Design	6
Visual Puzzles	3
Figure Weights	6
Matrix Reasoning	3
Digit Span	4
Picture Span	4
Coding	3
Symbol Search	1

*Note: 2018 scores are from the WPPSI-IV.*

#### LANGUAGE DEVELOPMENT

##### Clinical Evaluation of Language Fundamentals-5

<u>Index</u>	<u>2019 SS</u>	<u>2018 SS</u>
Core Language	64	(70)
Expressive Language	70	---
Language Structure	65	---

  

<u>Subtest</u>	<u>2019 Scaled</u>
Sentence Comprehension	1
Word Structure	5
Formulated Sentences	4
Recalling Sentences	5

*Note: In 2018, Joey was administered the language subtests from the WPPSI-IV, obtaining an overall score of 70.*

#### SENSORY FUNCTIONING /PERCEPTUAL INTEGRATION

##### Beery-Buktenica Test of Visual Motor Integration

<u>Subtest</u>	<u>2019</u>	<u>2018</u>
Visual-Motor Integration	82	72

#### ACADEMIC READINESS

##### Bracken Basic Concepts Scale, Third Ed.

<u>Scale</u>	<u>2019 SS</u>	<u>2018 SS</u>
School Readiness	68	69

#### ADAPTIVE FUNCTIONING

##### Adaptive Behavior Assessment System, Second Ed

<u>Domain</u>	<u>2019 SS</u>
Conceptual	59
Social	60
Practical	74
Global Adaptive Composite	56

  

<u>Adaptive Skill Area</u>	<u>2019 Scaled</u>
Communication	2
Community Use	5
Academics	2
Home Living	3
Health and Safety	1
Leisure	3
Self-Care	2
Self-Direction	5
Social	7

##### Behavior Assessment System for Children-3

<u>Strengths Scales</u>	<u>2019 T</u>	<u>2018 T</u>
Adaptability	39	38
Social Skills	48	35
Leadership	27	---
Activities of Daily Living	33	36
Communication	34	34
Resiliency	34	37

  

<u>Problem Scales</u>	<u>2019 T</u>	<u>2018 T</u>
Anger Control	80	69
Bullying	48	58
Developmental Social	77	63
Emotional Self-Control	75	66
Executive Functioning	75	67
Negative Emotionality	68	61

#### EMOTIONAL AND BEHAVIORAL FUNCTIONING

##### Behavior Assessment System for Children-3

<u>Scale</u>	<u>2019 T</u>	<u>2018 T</u>
Hyperactivity	74	55
Aggression	62	54
Conduct Problems	45	---
Anxiety	74	72
Depression	58	60
Somatization	43	44
Atypicality	108	64
Withdrawal	88	63
Attention Problems	65	65

*Note: In 2018, Joey's parents were asked to complete the BASC-3-Pre for children ages 0-5. In 2019, They completed the BASC-3 for children ages 6-11.*