



# NEUROPSYCH ASSESSMENTS OF GREATER BOSTON

Dear parent or guardian,

Thank you for inquiring at the Neuropsych Assessments of Greater Boston for an evaluation of your child.

The following are the typical steps involved in scheduling an evaluation:

1. Following an initial telephone conversation, you will be required to complete and return the **Intake Form** as soon as possible. This form helps us with valuable information necessary to better understand the child's current level of function, along with background and family information. If applicable, please send copies of:
  - a. Recent report cards, any prior psychological, developmental, neuropsychological or academic (i.e. CORE) evaluations
  - b. Special Education plans (i.e. IEPs, 504 plans)
  - c. Recent therapy reports or discharge summaries

Upon receiving the **Intake Form**, we will contact you to set up the initial intake meeting.

Please inform us if testing is scheduled or being requested elsewhere in the near future (i.e. through school).

2. The **initial meeting** is approximately one to two hours.
  - a. This meeting allows us to better understand your questions and concerns, and to determine the best approach going forward
3. Following the initial meeting, the actual **evaluation** will be scheduled.
  - a. To help ensure that your child is best prepared for the evaluation, please make sure that:
    - i. They go to bed at an appropriate time, so they are not tired the following day.
    - ii. They have a filling breakfast the morning of the evaluation. Protein, in particular is helpful for keeping a child feeling full.
    - iii. To prepare the child for the assessment, particularly if they are nervous, please let them know that this is not a typical type of doctors appointment- i.e. there are no shots.

Share with them that everyone has specific strengths, and there are things that people find to be hard. Our job is to find out what they are good at and what's tough for them, so we can find ways of making those hard things easier. The day will be

spent doing different types of activities such as drawing, working with blocks and answering different types of questions. This is not like school and how they do in the appointment will not affect their school/grades.

- b. If your child normally takes medication, please discuss this with us prior to the day of testing. Typically, children do not take medicine that affects attention (i.e. for ADHD) on the day of an assessment.
  - c. **A parent or guardian should accompany the child to the appointment.** It is not necessary for both parents to attend. If someone else has to bring your child to the appointment, please send along a signed consent form giving us permission to test your child on the day of the appointment.
  - d. A typical evaluation takes between 3 to 6 hours. Please bring a morning snack for your child, as well as a lunch. There are several local restaurants if you choose to go out for lunch.
  - e. Please do not bring your child if he/she has an illness that may be contagious or transmittable (i.e. flu, strep throat, chicken pox, conjunctivitis). Your appointment can be rescheduled when your child is well. Please see below for the cancellation policy.
  - f. We will give you a set of forms for the child's teacher to fill out in efforts to better assess how your child is functioning in school. Please ensure that the teacher receives these forms. The teacher is asked to mail the questionnaires directly to our office in the self-addressed envelope provided.
4. The **Feedback session** is approximately one to two hours.
- a. Parents are asked to come without their children, particularly if the child is young. If their child is a teenager, they may want to attend the session to hear the results of the testing.
  - b. The feedback is designed to review the results of the assessment as well as further discuss the child's functioning. During this appointment, potential diagnoses are discussed along with treatment recommendations for home and school.
5. Within a few weeks of the feedback session, the parents will receive a copy of the **report** in the mail. The report will include a review of relevant history, performance on the assessment, conclusions (including diagnosis, if appropriate) and recommendations.
6. **Professional Services and Payment:**
- a. Some of our clinicians are in-network providers for Blue Cross Blue Shield (BCBS), Massachusetts Behavioral Health Partnership (MBHP), United Behavioral Health (UBH) and Harvard Pilgrim.

Please be aware that insurance does not cover all services. Refer to our financial policy for additional information or contact us via phone or email.

- b. We also accept payment through cash, check, Visa or Mastercard

**7. Cancellation Policy**

We require a **48 hour notification of cancellation**, the exception being in cases of hospitalization or serious illness.

**8. Confidentiality**

Please review the policy regarding confidentiality. This form is available on the website [www.nagb.biz](http://www.nagb.biz). You can also request a paper copy of that form.

Please sign and return one copy of this form and keep a copy for your own records.

Your signature below indicates that you have read this agreement and agree to its terms.

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Client's Name

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Signature of parent or guardian

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Date