

Psychoeducational Assessments (Ages 6-18)

New Referrals:

• Children/Adolescents can be referred by their parents directly and would only require a physician referral if required by the private insurance company.

Initial Appointment:

- At the initial assessment, you will be asked to provide relevant school records (report cards, documented adaptations, IPPs), and additional previous assessments such as reports from Speech-Language Pathologist, Occupational Therapist, previous cognitive assessments)
- You will meet the Psychologist for an initial appointment to allow information to be gathered coupled with a description of the areas of difficulties that prompted the appointment. During the initial assessment, the Psychologist takes the opportunity to gather information about the child/adolescent and their family and decided whether or not a Psychoeducational Assessment is required. If not required, alternative options will be discussed.
- If a Psychoeducational Assessment is required, consent forms will be signed to collaborate with the child/adolescents teacher.

Testing Sessions:

- Direct testing ideally takes place in the morning on 2 days, each consisting of 3 testing hours (i.e., 6 total hours).
- Parents will be asked to remain in the waiting room.
- It's recommended that a drink and snack is provided by the parent so the child can take a short break during the testing period.

Feedback:

- A feedback session will be scheduled once the testing has been completed, tests have been scored and a draft report has been written.
- Parents are encouraged to ask questions regarding the results and recommendations. Typically children under the age of 12 are not required to attend this appointment

Payment:

- The total cost of the psychoeducational assessment is **\$2800.00**. Keep in mind additional costs may incur if additional testing is needed. If required, the Psychologist will speak with the parent before administering additional assessment tools.
- The total cost of the Psychoeducational assessment is broken down as follows:

*	Initial appointment:	\$190.00
*	Direct Testing, Part 1:	\$570.00
*	Direct Testing, Part 2:	\$570.00
*	Indirect hours (scoring, report writing)	\$1 280.00
*	Feedback session:	\$190.00

• Payment is required in increments after each sessions. Receipts are provided for insurance companies reimbursement. Please note, insurance company policies vary in terms of coverage and it's strongly recommended that you consult your insurance companies policy.

I, ______, have read the above agreement and I've had the opportunity to ask any questions related to consent for assessment. I am aware that access to psychological services is voluntary and at any time if deemed necessary I can withdraw consent to services.

NAME (PLEASE PRINT)	SIGNATURE	DATE
NAME (PLEASE PRINT)	SIGNATURE	DATE
SIGNATURE OF LEGAL	DATE	