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Parent's Guide to Pediatric Neuropsychological Services at Advanced Neurobehavioral Health of Southern California

What is a pediatric neuropsychologist and what services do they provide?

Neuropsychology is a subspecialty field of psychology requiring advanced knowledge and skills acquired through a formal sequence of specialized education and training. While psychologists in general specialize in a variety of aspects of human behavior, a clinical neuropsychologist is a professional psychologist trained in the science of brain-behavior relationships. A pediatric neuropsychologist is a clinical neuropsychologist who delivers evaluation, consultation, and intervention services based upon the scientific study of human behavior as it relates to normal and abnormal functioning of the developing central nervous system. At ANH, we emphasize that appropriate and comprehensive evaluation services should be provided prior to intervention to ensure that treatment plans and academic planning are based on accurate knowledge of a child's strengths and weaknesses. The pediatric neuropsychological evaluation involves a comprehensive assessment of a child's behavioral and emotional status, intellectual abilities, attentional capacity, speech and language skills, academic skills, visual-perceptual functioning, memory functioning, motor skills, and ability to plan, organize and solve problems. The goals of a pediatric neuropsychological evaluation include; delineating the child's current strengths and weaknesses, identifying the child's problem solving approach, assisting with diagnostic clarification, facilitating patient care and rehabilitation through provision of comprehensive recommendations for intervention and treatment, and documentation of improvement or deterioration via monitoring and follow up care over time.

How does a referral to ANH for a pediatric neuropsychological evaluation help my child?

Children with common neurodevelopmental disorders (ADHD, Learning Disabilities, Autism Spectrum Disorders, Prematurity/Low Birth Weight, Mood Disorders) experience a variety of challenges occurring across multiple developmental stages, resulting in a range of symptom severity from subtle to more significant impairments in the home, school and community settings. While many of these children respond well to standard interventions and treatment, others present with increased complexity and co-occurring conditions resulting in increased struggles for the child, and frustration on the part of parents, teachers, and providers. At ANH, our evaluations assist with diagnostic clarification and identification of children's neurocognitive strengths and weaknesses, and our evaluation summaries also feature comprehensive individualized recommendations and interventions with an emphasis on addressing primary parent concerns. We actively seek feedback regarding our services and outcomes, and parent and provider satisfaction has consistently been very positive. Our evaluation process always concludes with a one hour feedback session with parents to thoroughly review the findings and recommendations and address their concerns and questions. We also provide parents with follow up care, attend IEP and school meetings, and assist parents with locating appropriate referrals to address the child's identified educational, therapeutic, medical, and social/emotional needs.

When is it appropriate to refer my child to ANH?

Our pediatric neuropsychologists have extensive experience working with a broad range of children, from those who may be experiencing subtle learning and behavioral problems, to children who are gifted and talented but struggling in social and community functioning, to those struggling with more significant neurodevelopmental disorders and acquired conditions (ADHD, LD, TBI, Epilepsy, Autism, Prematurity/Low Birth Weight,

FAS/FAE, Genetic & Chromosomal Syndromes, Cancer/Brain Tumors, Mood Disorders). Some concrete examples of applied pediatric neuropsychology practice at ANH include;

ADHD – Our evaluations assist with diagnostic clarification, but beyond diagnosis, we recognize the need to consider the extensive variability and co-morbidity amongst children with ADHD, as well as the need for considering developmental stage, gender differences in ADHD, and subtype variability (sluggish cognitive tempo, inattentive, hyperactive, combined type). We are concerned with identifying specific strengths and weaknesses in order to tailor educational and behavioral interventions appropriately, and we often work with neurologists and pediatricians to assist with titration of stimulant medication utilizing on-off medication computerized continuous performance testing.

Prematurity/Low Birth Weight – As the number of premature/LBW children has increased over time, pediatric neuropsychological research has helped us to become much more adept at identifying mild to more severe neuropsychological complications in these children. Recent group studies are identifying specific learning, behavioral and social problems not only in very low birth weight children (less than 1500 grams) but such deficits are also noted in many children with birth weights extending to the 2500 gram range. These findings highlight the importance of early baseline neuropsychological testing and continued follow-up evaluations to monitor progress and response to intervention over time.

Autism Spectrum Disorders – Consistent with most child health care providers, we have experienced a significant increase in ASD related referrals. We find that in many instances, we are charged with helping parents and care providers to better understand the difficult differential diagnostic distinctions between children with low functioning autism, language disorders, and mental retardation/intellectual disability as well as distinctions between high functioning autism, Asperger syndrome, nonverbal learning disabilities, anxiety, and oppositional behaviors. These distinctions become critical for appropriate treatment and intervention planning.

Learning Disabilities – We work with parents and providers not only to help identify learning disabilities in children, but more importantly to identify the functional deficits that underlie learning differences. Deficits in attention, memory, executive functioning, phonological processing, language, visual spatial abilities, processing speed, and emotional functioning are often noted in children with learning disabilities as primary causative factors or as significant exacerbating/contributing factors. We assist parents, teachers and providers with targeting interventions to address underlying weaknesses. It is important to note that as neuropsychological research has increased our awareness and understanding of normal and abnormal learning development, we are able to evaluate and identify risk for learning disability as early as preschool, which improves our ability to provide proactive and preventative early intervention.

Epilepsy - Although epilepsy is one of the most common neurological disorders of childhood, it is frequently misunderstood, and critical cognitive, behavioral and learning issues in pediatric epilepsy are often unidentified. Our team of neuropsychologists has extensive experience working with children who struggle with epilepsy and associated learning, behavioral and social/emotional issues. Our evaluation services emphasize assessment of key areas of risk in childhood epilepsy, and through regular follow up care, we are able to track progress in response to educational, medication, and behavioral interventions.

Concussion/Mild Traumatic Brain Injury (TBI) – Pediatric neuropsychologists have particular expertise in the area of brain injury. We work with children who have suffered moderate to severe TBIs, as well as many children presenting with more mild TBI and concussion. There is converging evidence regarding the importance of careful monitoring of children who have experienced concussion and mild TBI, particularly those children involved in sports or activities that increase their risk for cumulative injury. Children involved in high risk sports are advised to obtain baseline neuropsychological testing that can be used as a gauge to monitor post-injury functioning and assist with return to play decisions.

Late Effects of Childhood Cancer Treatment - Medical treatment for acute lymphoblastic leukemia (ALL) and brain tumors has improved survival rates considerably. However, neuropsychological follow up studies have revealed subtle to more significant short and long term cognitive deficits associated with both CNS radiation

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therapy (CRT) and Intrathecal (IT) chemotherapy. Regular neuropsychological monitoring has become an important component of care for children surviving cancer, as evaluation results inform educational, behavioral and social interventions.

Does a neuropsychological evaluation differ from those of a school psychologist or a clinical psychologist?

Yes, in both cases. School psychologists, clinical psychologists, and clinical neuropsychologists all have similar goals in wanting to provide the best care for their clients. However, school psychological evaluations are typically completed by master's level clinicians with training and emphasis focusing narrowly on eligibility criteria for school services, rather than consideration of multiple neuropsychological domains and the impact across multiple settings. Clinical psychologists are typically PhD level clinicians who focus on mood, emotional and personality evaluations in addition to therapy. A clinical neuropsychologist is a PhD level clinician trained in the science of brain-behavior relationships with an emphasis on understanding the impact of both normal and abnormal brain functioning on a broad range of cognitive, emotional, and behavioral functions. The distinctive features of neuropsychological evaluations and consultations in assessing brain function and dysfunction include the use of objective neuropsychological tests, systematic behavioral observations, and interpretation of the findings based on knowledge of the neuropsychological manifestations of brain-related conditions.

How do I choose a pediatric neuropsychologist?

An appropriately trained clinical neuropsychologist has earned a doctorate degree in psychology from an APA-accredited university. Further specialization is completed through a 1 year clinical internship and 2 year postdoctoral fellowship in pediatric neuropsychology. Board certification indicates an additional means of peer and public recognition of demonstrated competence in the area clinical neuropsychology. A list of board certified clinical neuropsychologists can be accessed via the American Academy of Clinical Neuropsychology website; <http://www.theaacn.org/diplomates/database/view.php>. Each member of our team of neuropsychologists has completed their educations at outstanding universities and has trained with the top clinicians and researchers in the field. They are members of prominent organizations, have published articles on a variety of topics, have held multiple academic health care and university positions, and are actively engaged in clinical research, as well as supervision of neuropsychologists in training.

Have clinicians at ANH received formal specialized training in pediatric neuropsychology?

Yes. When seeking appropriate evaluation services for your child, it is important to consider the training and background of providers. In the San Diego and Orange County areas there are few board certified clinical neuropsychologists and even fewer who specialize in pediatric neuropsychology. At ANH, our pediatric neuropsychological service director is a board certified clinical neuropsychologist with extensive clinical, research and training/supervision experience in pediatric neuropsychology, and all of our child clinicians are PhD level, licensed psychologists who have received formal specialization training in clinical pediatric neuropsychology at the internship and residency/fellowship level in accordance with the highest professional and ethical standards of our governing bodies and professional organizations. Further information regarding our background and training as well as complete CVs are available via our website (www.ANHsocial.com).

How long does it take to receive evaluation results? 3 weeks. While many evaluation based services require parents to wait up to 3 months for a completed report or evaluation summary, our policy is to provide parents with a full evaluation report no more than 3 weeks after the child's date of evaluation.

Does ANH provide case management and continuity of care? Absolutely! At ANH, we emphasize communication with parents, physicians, therapists and schools as well as our supportive role as one of many team players in a child's healthcare. Our involvement does not end at the conclusion of an evaluation as we remain available for parents and providers in order to discuss our findings and the applications across home, school, social, community, therapeutic and medical settings.

What age range does the ANH team work with? Infancy to young adulthood. At ANH we provide evaluation and consultation services for children as young as 12 months (for example – premature/low birth weight children requiring baseline neuropsychological testing and monitoring) to college age individuals (for example

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– college board requirements for modifications/accommodations often require evaluation by an appropriately trained/credentialed neuropsychologist).

Does ANH provide evaluations in Spanish? Yes. Our ANH staff includes pediatric neuropsychologists who are fluent in Spanish allowing us to provide evaluation and consultation services in Spanish without having to rely on untrained translators who are not experienced in child neuropsychological evaluation procedures.

Do you participate in insurance plans? Yes. We provide services both in and out of network with regard to insurance. Our pediatric service is primarily out of network, and we provide parents with superbills/invoices to submit to their insurance company for reimbursement. However, in order to serve our military families in both San Diego and Orange County we also participate in the Tricare/Tri-West Health Care Alliance network. As pediatric neuropsychology is a subspecialty with relatively few board certified network/paneled providers in the area, we often arrange single case agreements with insurance providers as well.

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