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Medical Neurology  
Medical-Legal Evaluations  
Neuro-Diagnostic Testing  
Neuropsychological Testing

Neuro-Ophthalmology  
Neurologic Rehabilitation  
Sleep Medicine  
Movement Disorders

Botox Therapy  
Headache Medicine  
Epilepsy Monitoring  
Pain Management

### Neuropsychological Assessment Frequently Asked Questions

1. What does a neuropsychological evaluation consist of and how long does it take?
  - ❖ Clinical interview with neuropsychologist (1 hour)
    - This portion of the evaluation consists of an interview to get an accurate picture of the patient's current functioning. The following information is obtained: demographic information (e.g., age, education level, occupation, marital status), current complaints (i.e., cognitive, emotional, physical), medical history, psychiatric history, developmental/educational history, social history.
  - ❖ Neuropsychological testing session with trained technician/psychometrist (2-5 hours)
    - This portion of the evaluation consists of various paper-pencil tests measuring a wide range of thinking abilities (e.g., memory, concentration, attention, visuospatial skills). The patient will also fill out self-report questionnaires regarding cognitive, emotional, and physical symptoms. Breaks can be taken as needed to stretch, use the restroom, eat lunch, etc.
2. Is there any way to study/prepare for a neuropsychological evaluation?
  - ❖ No, there is nothing you can study
  - ❖ But the following is recommended to prepare:
    - Get a good night's sleep the night before
    - Eat breakfast and bring snacks/lunch and water
    - Bring a jacket/sweater as it can be cold in the testing room
    - Bring/wear hearing aids or eyeglasses
    - Take your medication(s) as you usually do and bring a current list of ALL medications

- Bring insurance card and picture ID
  - Provide records of previous neurodiagnostic testing (e.g., brain scans such as CT or MRI scans) and/or results from previous neuropsychological evaluations if completed at another hospital or institution
  - If the patient has difficulty providing information about their history, it is helpful for a family member, spouse, or friend to accompany them
3. Is there anything that would occlude me from being eligible for neuropsychological testing?
- ❖ We are able to test individuals who are proficient or better in English, Spanish, Mandarin
  - ❖ It is the goal of the neuropsychologist to get the best possible picture of the patient's current functioning. The following may interfere with a patient's ability to put forth adequate effort:
    - Excessively tired or fatigued
    - Greater than usual levels of pain and fatigue
    - Not motivated to put forth their best effort
    - Greater than usual sadness and anxiety, significant instability in mood
    - Recent use of illicit substances and alcohol, 30 to 60 days of sobriety is ideal
    - Active infection (e.g., bladder infection) or contagious illness (e.g., cold, virus)
4. Will I find out the results of my neuropsychological evaluation?
- ❖ Yes. Typically, a feedback session (45 minutes) is scheduled for 2-4 weeks after you have completed the testing to review all results with the neuropsychologist.
  - ❖ However, you can also meet directly with your referring doctor for **basic** conclusions about the evaluation (e.g., diagnosis).
5. Why am I being referred for neuropsychological testing?
- ❖ Your Primary Care Provider or Neurologist likely referred you for testing as part of your larger medical/neurological work-up.
  - ❖ Neuropsychological testing can provide the following information:
    - Assist in differential diagnosis (e.g., to determine whether neurocognitive changes are associated with psychiatric vs neurological processes)
    - Assist with evaluation before and after neurosurgical or pain procedures (e.g., deep brain stimulation)
    - Provide a baseline against which subsequent evaluations can be compared
    - Provide a characterization of neurocognitive strengths and weaknesses
    - Provide recommendations for rehabilitation or other treatments
    - Provide recommendations regarding level of supervision needed to maintain safety in the home and community
    - Provide recommendations regarding returning to work or school
6. What will the results mean?
- ❖ The neuropsychological evaluation will tell you and your physician whether problems with memory, concentration and other neurocognitive abilities are normal for age or

represent age advanced declines suggesting diagnosis with mild cognitive impairment or dementia.

- ❖ The neuropsychological evaluation will provide you and your physicians with information related to the potential causes of your neurocognitive impairments and recommendations for improving cognition.
7. Will my family get to participate?
- ❖ It is encouraged that family members or significant others accompany the patient to the appointment for the clinical interview (1<sup>st</sup> hour). After this, the patient will complete the testing session alone (~3 hours). Often times, the person who accompanied the patient will leave and the tech will call him/her 30 minutes before testing will be over.
  - ❖ Patients are encouraged to bring family members with them to the feedback appointment.
8. Will snacks/water be provided?
- ❖ Water will be provided. However, it is recommended that the patient brings his/her own snacks and lunch.
9. Is there a cancellation fee?
- ❖ Yes, there is a \$200 fee if you cancel the testing appointment or do not show up without providing The Neurology Center with 24 hour notice. There is a \$75 fee if you cancel the feedback appointment or do not show up without providing The Neurology Center with 24 hour notice.
10. Are there tele-visit appointments available?
- ❖ Yes.
11. What are you doing to ensure cleanliness and safety during COVID-19?
- ❖ All patients and staff are screened with a temperature check and wear masks at all times. The lobby is arranged to maintain social distancing. Patients wear gloves during testing and are either 6 feet apart from the technician or are separated by a plexiglass barrier. Handwashing is frequent and all materials, tables, and chairs are wiped down/cleaned in between patients.

