Ed's grasp of verbal concepts and his verbal skills are relatively weak Arithmetic problems, presented verbally, also presented difficulty for him. Ed was easily distracted and sometimes gave up prematurely on tasks. On the other hand, he enjoyed the challenge presented by some of the timed tests and became highly motivated and competitive when he was working against the clock. He generally worked quickly and was not careless in his performance.

The Wide Range Achievement Test was used to assess Ed's intellectual abilities. He did best on the arithmetic section, emphasizing computation rather than problems. His arithmetic score was at the fifth grade level and in the high average range while his reading and spelling scores were at the third grade level and in the low average range.

Although Ed's intelligence level suggests that he could perform satisfactorily in a regular classroom, the imbalance in his intellectual faculties probably makes it difficult for him to complete tasks that emphasize verbal skills and that do not involve clear and relatively brief time limits. His ability to handle some tasks very easily while having considerable difficulty with others may well be frustrating and confusing to Ed. I suggest that his mother request an educational evaluation to determine whether special help or modifications in Ed's assignments might better accommodate the imbalance in his intellectual abilities.

# Assessment of Personality

Ed is experiencing considerable anxiety and depression. However, he seems to have gained some control over these feelings through his high activity level. Although Ed is capable of a satisfactory level of impulse control, his acting out behavior seems to be a way for him to alleviate depression and anxiety and so becomes a rewarding behavior despite its adverse consequences. Ed is a rather unreflective boy who has little capacity for insight or empathy. He tends to be action-oriented and prefers to deal with problems and upset through activity rather than through discussion.

Ed seems to have low self-esteem. He is very concerned about his weak performance at school and perceives himself as incompetent and helpless. He wants to improve his academic performance but does not know how to make the change and feels hopeless and pessimistic. Ed also seems to feel different from his peers, viewing himself as strange and even menacing. His parents' recent divorce seems to have contributed to these feelings of differentness as does Ed's strong underlying anger. In relationships, Ed prefers a dependent stance; however, when that is prevented, he distances himself and becomes angry and disappointed. This pattern is especially characteristic of Ed's relationship with his father who bears the brunt of his anger. His mother, his sister, and his peers also are viewed as having let him down. Ed feels that his mother is pushing him

away, possibly through her efforts to have Ed spend more time with his father. Ed is uncomfortable with this yet does not want to disappoint his mother.

At present, Ed is having some difficulty figuring out who he is and establishing satisfactory ego boundaries. Although he has some inner strengths, he feels as if he is on a road toward destruction and is aware that he needs some help.

## Diagnosis

313.81 Oppositional Defiant Disorder, moderate Axis I. 300.4 Dysthymic Disorder, early onset, moderate 315.00 Reading Disorder (provisional)

Axis II. V71.89 No diagnosis on Axis II

Axis III. None

Writing and Record Keeping in Counseling

Axis IV. Separation from father, conflict with mother and teacher, declining academic performance

Axis V. 60

## Recommendations

Both counseling and academic help seem indicated. Ed may well show some initial resistance to those interventions, but that resistance is likely to diminish with time and patience. Although Ed does not manifest severe pathology, the nature of his difficulties can have a strong adverse impact on his future development if not ameliorated soon. Because Ed is not very verbal or insightful, he may have difficulty involving himself in a conventional counseling relationship. Play therapy, providing both choices and clear limits, is likely to be especially helpful as is behavioral counseling, giving him acceptable ways to express and manage his feelings of anger and frustration. Family counseling, with Ed, his mother, his sister, and, if possible, his father also is indicated to help Ed cope with the impact of the divorce, to help him express himself to his family, and to establish more consistent contact between Ed and his father. An academic evaluation is recommended to clarify the nature of Ed's apparent Learning Disability, focused on verbal and reading skills. Subsequent tutoring and educational changes should not only improve his academic performance but also his self-esteem and optimism.

Start reading here. This is just a sample of a counselor's

# assessment report - a great one to model after! Psychological Assessment by a Counselor

The following assessment report was written by a licensed professional counselor and illustrates the use of objective tests of ability and personality, as well as information gleaned from an interview, to provide useful recommendations.

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## ASSESSMENT REPORT

Client: John Marino Counselor: Clare Alvarado, LPC, CCMHC

#### Tests Administered

Wechsler Adult Intelligence Scale COPSystem (CAPS ability battery, COPS interest inventory, COPES work values survey) Millon Clinical Multiaxial Inventory

#### Reason for Evaluation

John Marino, an 18-year-old white male, was referred for an evaluation after his conviction for car theft. John is being considered for participation in a pre-release program that will provide him with job training and employment and prepare him for his release from prison in six months. However, during his initial interview for that program, John seemed withdrawn and depressed and had considerable difficulty responding to the interviewer's questions. An assessment was requested to determine his suitability for the pre-release program and, if that was recommended, to provide suggestions as to how to help him formulate future plans.

# **Background**

At the time of his arrest, John was in his senior year of high school in a special education class. He was living with his mother and two younger brothers; the whereabouts of his father were unknown. John reported an interest in engaging in noncompetitive sports such as in-line skating and biking and in watching football and basketball games. He stated that he had dated little and had no close friends. He acknowledged occasional use of marijuana and alcohol prior to his incarceration. He does not have clear career goals but is interested in completing high school.

## **Impressions of Client**

John is a tall, slender man who appears his stated age. John initially gave a negative impression when seen for the assessment. He seemed disinterested in what was going on around him and was dressed in clothes that were soiled. John did not have good verbal skills, volunteered little information about himself, and was difficult to engage in discussion.

# Writing and Record Keeping in Counseling

## Test-Taking Behavior

However, as the assessment progressed, John became more involved and responsive. Despite his initial negative reaction to the assessment process, he was cooperative and motivated throughout the process. He was interested in and curious about the testing and often asked to have another chance or an explanation of tasks he had failed. John is a reasonably persistent worker with a satisfactory grasp of trial-and-error learning. His concentration and attention were satisfactory and he had little difficulty following directions. His short term memory was above-average. He worked at a satisfactory rate of speed on visual-motor tasks but manifested considerable slowness on tasks that called for verbalization or writing.

## **Abilities**

On the Wechsler Adult Intelligence Scale, John achieved a verbal IQ score of 87, a performance IQ score of 86, and a full scale IQ score of 85, placing him in the low average range of intelligence and between the 11th and 25th percentiles. This instrument yielded no evidence of learning disability or severe pathology. John has poor reading skills although he can read and perform simple mathematical computations. Despite his disinterested demeanor, John is very much aware of what is going on around him, knows of what is expected of him, grasps situations fairly quickly, and can plan appropriate actions. However, John has developed little interest in academic pursuits. His fund of information and his vocabulary are particularly poor. He also tends to have a low energy level.

John's scores on the Career Ability Placement Survey (CAPS) battery were consistent with his scores on the WAIS. All eight scores were below average, but his scores in mechanical reasoning, manual speed and dexterity, and spatial relations were relatively high (4th stanine) while scores in language usage and verbal reasoning were quite low (2nd stanine).

# Personality

Assessment of John's personality yielded no evidence of severe pathology but did highlight some areas of concern. John seems to be a guarded and suspicious young man who is well-defended and resistant to self-disclosure. He tends to be rigid and constricted and has difficulty dealing with anger appropriately. He is a fairly passive person who wants to be liked but who has little genuine interest in other people. His social skills are weak and he is not interested in working on these skills in order to relate better to others. Some underlying depression was

noted, but John seems to be masking and denying these feelings with a bland exterior. He does not seem to be troubled by significant anxiety.

#### Interests and Values

The COPSystem interest inventory suggested that John's strongest interests are in outdoor and skilled technology areas. Lowest interests were in arts, communication, and science, professional. The values inventory indicated that John valued privacy and being concrete and realistic; values such as aesthetics, social concern, and leadership were not important to him. These are consistent with John's expressed and manifest interests and abilities.

## Diagnosis

Axis I. 311 Depressive Disorder Not Otherwise Specified

305.00 Alcohol Abuse (provisional)

305.20 Cannabis Abuse (provisional)

Axis II. V62.89 Borderline Intellectual Functioning

Paranoid and Schizoid Personality Traits

Axis III. None

Axis IV. Incarceration

Axis V. 55

#### Recommendations

John has more potential than is initially evident. He can profit from educational experiences and should be able to learn skills that will facilitate his employment. He can be motivated and hard-working, although he needs to develop goals and direction, improve his life skills, and receive some occupational training. John probably would be most successful in a hands-on job in which he has clear direction but can work fairly independently, producing a visible product. One of the current opportunities at the pre-release center involves training and employment in bicycle repair and an option such as this one may be well-suited to John's preferences and abilities.

John seems to have the capacity and motivation to benefit from and successfully complete the pre-release program. Standards should be set for him that are realistic yet mildly challenging. Counseling is recommended to help him deal with personal issues including his underlying depression and the conflict he seems to experience between his tendency to withdraw from others and his wish to be liked. Attention also should be paid to John's impulse control and his use

of drugs and alcohol, probably a greater problem than John acknowledged. John is a young man with some motivation and strengths; counseling and occupational training at this time has the potential to make an important difference in his future.

Stop reading here where the section ends.

# **REQUESTING TREATMENT AUTHORIZATION**

Another written report that counselors might prepare early in the counseling process is a request for authorization of treatment. With the spread of managed care, counselors increasingly are required to justify the need for counseling before payment for sessions is authorized. Typically, a few sessions will be authorized by telephone, affording the counselor time to prepare and submit a written request for authorization of treatment. These reports usually are relatively brief. The following is a request for treatment authorization for Sharon Miles, a 45-year-old woman, organized according to an outline typical of such requests.

*Clinical condition* (reasons for seeking treatment, current condition, severity, duration, impairment, previous treatment):

Presenting concerns included long-standing mood instability, significant depression, and weight gain of over 75 pounds, resulting in physical problems. Although client is managing family demands reasonably well, she has few leisure activities and marital conflict is reported. Symptoms have been present at least since suicide of mother six years ago. There is no history of psychological treatment.

*Brief mental status* (abnormal findings only): Moderate depression and anxiety, mood instability, some impairment in behavior and thinking.

# Diagnoses:

Axis I. 301.13 Cyclothymic Disorder, moderate

Axis II. V71.09 No diagnosis on Axis II

Axis III. Obesity, asthma, arthritis reported

Axis IV. Marital conflict

Axis V. 58

# Treatment goals and focus of treatment:

- 1. Reduce depression, stabilize mood
- 2. Improve self-esteem, activity level
- 3. Reduce marital conflict, improve communication
- 4. Reduce weight to healthy level
- 5. Facilitate grieving for death of mother