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ASSESSMENTS 2019-2020

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**HANDWRITING**

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<td>6-0 through 89-11 X X X</td>
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<td>EVA40144</td>
<td>Mini-Mental State Examination—2nd Edition (MMSE-2)</td>
<td>18 through 100 X</td>
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<td>EVA0101</td>
<td>Dynamic Loewenstein Occupational Therapy Cognitive Assessment (DLCTCA)</td>
<td>18 through 69 X</td>
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<td>Dynamic Occupational Therapy Cognitive Assessment for Children (DOTCA-Ch)</td>
<td>6-0 through 12-0 X</td>
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<td>EVA0102</td>
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<td>70 and older X</td>
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<td>Bay Area Functional Performance Evaluation (BaFPE)</td>
<td>18 and older X X</td>
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<td>EVA40159</td>
<td>Behavior Rating Inventory of Executive Function (BRIEF-2)</td>
<td>5 through 18 X X X</td>
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<td>EVA40110</td>
<td>Behavior Rating Inventory of Executive Function—Preschool Version (BRIEF-P)</td>
<td>2-0 through 5-11 X</td>
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<td>EVA0115</td>
<td>Cognitive Performance Test (CPT) REVISED 2018</td>
<td>59 and older X X</td>
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<tr>
<td>EVA1493</td>
<td>Cognitive Assessment of Young Children (CAYC)</td>
<td>2 mos through 5-11 X</td>
<td>44</td>
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<td>EVA526130</td>
<td>Comprehensive Trail-Making Test (CTMT)</td>
<td>8-0 through 74-11 X X X</td>
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<tr>
<td>EVA526990</td>
<td>Test of Memory and Learning—Senior Edition (TOMAL–SE)</td>
<td>55 through 89 X X X</td>
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<tr>
<td>EVA53121</td>
<td>Test of Information Processing Skills (TIPS)</td>
<td>5 through 90 X X X</td>
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**BEHAVIOR**

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<tr>
<td>EVA526168</td>
<td>Behavioral and Emotional Rating Scale—2nd Edition (BERS-2)</td>
<td>5-0 through 18-11 X X</td>
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<td>EVA67701</td>
<td>Social Profile: Assessment of Social Participation in Children, Adolescents and Adults</td>
<td>18m through adult X X X</td>
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<td>EVA526126</td>
<td>Conduct Disorder Scale (CDS)</td>
<td>5 through 22 X X</td>
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<tr>
<td>EVA526197</td>
<td>Evaluating Acquired Skills in Communication—3rd Edition (EASIC-3)</td>
<td>3 mos through 6 yrs X</td>
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**AUTISM**

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<tr>
<td>EVA55188</td>
<td>Social Responsiveness Scale—2nd Edition (SRS-2)</td>
<td>2½ through adult X X X</td>
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<tr>
<td>EVA526140</td>
<td>Gilliam Asperger Disorder Scale (GADS)</td>
<td>3-0 through 22-0 X X X</td>
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### Handy Evaluation Chart

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<tr>
<td>EVA5263000</td>
<td>Autism Psychoeducational Profile—3rd Edition (PEP-3)</td>
<td>6 mos to 7 years</td>
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<tr>
<td>EVA526531</td>
<td>Gilliam Autism Rating Scale—3rd Edition (GARS-3)</td>
<td>3 through 22</td>
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<tr>
<td>EVA55131</td>
<td>Childhood Autism Rating Scale—2nd Edition (CARS-2)</td>
<td>2 years and older</td>
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<td>EVA40706</td>
<td>The SCERTS Model: A Comprehensive Educational Approach for Children w/ Autism Spectrum Disorders</td>
<td>n/a</td>
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<tr>
<td>EVA526203</td>
<td>TEACCH Transition Assessment Profile — Second Edition (TTAP)</td>
<td>3rd to 12th grade</td>
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### SCHOOL-BASED EVALUATIONS

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<tr>
<td>EVA551100</td>
<td>School Motivation and Learning Strategies Inventory (SMALSI)</td>
<td>8 through 18</td>
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<tr>
<td>EVA40601</td>
<td>Educational Assessment of School Youth for Occupational Therapists (EASY-OT)</td>
<td>pre-k to 12th grade</td>
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<td>EVA40155</td>
<td>Children's Academic Intrinsic Motivation Inventory (CAIMI)</td>
<td>9 through 14</td>
<td>X</td>
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<tr>
<td>EVA50304</td>
<td>Schoolies Pediatric Fine Motor Assessment—4th Edition (SFMA)</td>
<td>3 and up</td>
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<td>EVA50306</td>
<td>Schoolies School Keyboarding Assessment: A Tool for Keyboarding Skills</td>
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### ACADEMIC SKILLS

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<tr>
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<td>EVA526133</td>
<td>Test of Early Written Language—3rd Edition (TEWL-3)</td>
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<td>Test of Written Spelling—5th Edition (TWS-5)</td>
<td>6 through 18</td>
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<td>EVA526000</td>
<td>Diagnostic Achievement Battery—4th Edition (DAB-4)</td>
<td>6-0 through 14-11</td>
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<tr>
<td>EVA5260</td>
<td>Test of Orthographic Competence (TOC)</td>
<td>6-0 through 17-11</td>
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<tr>
<td>EVA551212</td>
<td>Decoding-Encoding Screener for Dyslexia (DESD)</td>
<td>1st to 8th grade</td>
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<td>EVA52671</td>
<td>Gray Oral Reading Tests—Fifth Edition (GORT-5)</td>
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<tr>
<td>EVA52603</td>
<td>Test of Word Reading Efficiency—Second Edition (TOWRE–2)</td>
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<tr>
<td>EVA052629</td>
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<td>EVA052615</td>
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<tr>
<td>EVA40607</td>
<td>Slosson Oral Reading Test—Revised 3 (SORT-R3)</td>
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### FUNCTIONAL SKILLS & ADAPTIVE BEHAVIOR

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<td>Adaptive Behavior Diagnostic Scale (ABDS)</td>
<td>2 through 21</td>
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<tr>
<td>EVA51801</td>
<td>DO-EAT: Performance-based assessment tool for children</td>
<td>5 through 8</td>
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### TRANSITIONAL & VOCATIONAL PLANNING

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<td>EVA1445</td>
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<td>13 through adult</td>
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<td>EVA1480</td>
<td>Transition Planning Inventory—2nd Edition (TPI-2)</td>
<td>14 through 22</td>
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### GONIOMETERS

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<td>EVA0601</td>
<td>Finger Goniometer</td>
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<td>EVA0602</td>
<td>180 Degree Goniometer</td>
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<tr>
<td>EVA0604</td>
<td>International Goniometer</td>
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Visit www.therapro.com for more information on these evaluations.
Sensory Processing Measure (SPM)

This unique assessment is the first to show how sensory processing problems manifest in various settings. The SPM includes 3 rating forms: Home Form, Main Classroom Form, and School Environments Form. It also offers descriptive clinical information on processing vulnerabilities, including under- and over- responsiveness, sensory-seeking behavior, and perceptual problems.

With the Sensory Processing Measure (SPM), you can now get a complete picture of children’s sensory functioning at home, at school, and in the community. Recognizing that sensory processing problems often manifest differently in different environments, this set of three integrated rating scales assess sensory processing, praxis, and social participation in elementary school children.

Firmly grounded in sensory integration theory, the SPM provides norm-referenced standard scores for two higher level integrative functions -praxis and social participation - and five sensory systems - visual, auditory, tactile, proprioceptive, and vestibular functioning. Within each system, it offers descriptive clinical information on processing vulnerabilities, including under- and overresponsiveness, sensory-seeking behaviour, and perceptual problems.

**COMPREHENSIVE KIT INCLUDES:** 25 Home Autoscore Forms, 25 Main Classroom Autoscore Forms, School Environments Form CD and Manual.

**SCHOOL KIT INCLUDES:** 25 Main Classroom Autoscore Forms, School Environments Form CD and Manual.

**HOME KIT INCLUDES:** 25 Home Autoscore Forms & Manual.

- EVA55101 Comprehensive SPM Kit .................................. $221.00
- EVA55102 SPM School Kit .................................. $174.00
- EVA55103 SPM Home Kit .................................. $138.00
- EVA55107 SPM Manual .................................. $93.00
- EVA55104 SPM Home Autoscore Form (25) .......... $59.00
- EVA55105 SPM Main Classroom Autoscore Forms (25) .......... $59.00
- EVA55106 SPM School Environments Form CD ........ $47.00

Sensory Processing Measure - Preschool (SPM-P)

Now you can identify sensory processing difficulties in children as young as 2 years of age. The new preschool edition of the popular Sensory Processing Measure lets you take an early look at overall sensory functioning as well as specific vulnerabilities that can affect learning.

Appropriate for 2- to 5-year-olds, the SPM-P measures the same functions as the SPM: Social Participation, Vision, Hearing, Touch, Body Awareness, Balance and Motion, Planning and Ideas, and Total Sensory Systems.

Within each sensory system, the SPM-P items also reveal specific problems, including under- and over-responsiveness, sensory-seeking behavior, and perceptual problems. In addition, the items provide information on the senses of taste and smell.

The SPM-P includes a Home Form, completed by the parent, and a School Form, completed by the preschool teacher or day care provider. Each form includes 75 items rated according to frequency of easily observable behaviors. Used together, the two forms provide a comprehensive overview of sensory processing, and allow quick comparison of the child’s functioning across settings.

Both the SPM and SPM-P support the core principles of RTI, and can be used for evidence-based practice, scientifically-based research, differentiated instruction, and progress monitoring. Clinicians are enthusiastic about the SPM-P, not only because it generates useful information, but also because it is easy for therapists to explain test results and engage parents in the treatment process. Scale names are comprehensible, results are visually summarized and interpretation is clear-cut.

**COMPLETE KIT INCLUDES:** 25 SPM-P Home AutoScore Forms; 25 SPM-P School AutoScore Forms; Manual.

- EVA55146 Complete SPM-P Kit .................................. $177.00
- EVA55147 SPM-P Home AutoScore Forms (25) ........ $59.00
- EVA55148 SPM-P School AutoScore Forms (25) ........ $59.00
- EVA55149 SPM-P Manual .................................. $93.00

Preschool SENSE: Preschool Sensory Scan for Educators

Developed by best-selling special needs author Carol Kranowitz, with guidance from expert occupational and speech therapists, this easy-to-use screening tool features customized checklists that can be implemented in the often-chaotic preschool classroom or playground. With side-by-side examples of typical and atypical responses to everyday sensory stimuli, this program helps teachers to recognize sensory processing patterns among students 2½ to 5 years old.

Its purpose is to offer educators a way to understand sensory challenges, as well as the behaviors that result from those challenges. Therapists and educators can then create a program specific to individual preschooler sand their classes, targeting areas of need. The workbook contains a sample introductory letter to parents and educators, as well as a permission form, to help therapists explain SPD and describe the purpose of the scanning process.

It also includes checklists for individual student responses to sensory stimulation and whole class charts to help organize the findings to give a clear picture of the needs of the class. A reference section describes how a typical preschool child develops and contrasts that to a preschooler with SPD. The checklists, charts, and reference section are divided into three categories of sensory processing: sensory modulation, sensory discrimination, and sensory-based motor skills. Each of these categories focuses on how the senses (tactile, vestibular, proprioceptive, visual, auditory and olfactory) are affected. A list of primary and secondary therapies is also included.

Preschool SENSE is a great way for occupational therapists and preschool teachers to collaborate on simple accommodations for their students. The manual includes complete screening and assessment instructions that have been designed, tested, and fine-tuned over the years. 64 pages,

- PP7533 Preschool SENSE Manual .................................. $9.95
- PP7534 Preschool SENSE Forms (enough for 8 children) ........ $14.95
**Test of Sensory Functions in Infants (TSFI)**

The TSFI helps identify infants with sensory integrative dysfunction—including those at risk for developing learning disabilities as they grow older. The TSFI provides a measure of sensory processing and reactivity, as well as scores on the following subdomains: Reactivity to Tactile Deep Pressure, Visual Tactile Integration, Adaptive Motor Function, Ocular Motor Control, Reactivity to Vestibular Stimulation.

Composed of 24 items, the TSFI can be used to assess infants with difficult temperament or developmental delays. The items require simple interaction with the baby, who is seated on the parent’s lap, with bare feet and forearms exposed. The therapist touches the child or presents various stimuli materials and then records the child’s reaction using clear-cut scoring criteria. It is also an excellent way to evaluate high-risk premature babies who may later develop learning problems. Brief, carefully constructed, and easy to administer and score, the test makes it possible to routinely screen infants for sensory integrative dysfunction.

**COMPLETE KIT INCLUDES:** 1 Set of Test Materials, 100 Administration and Scoring Forms, 1 Manual.

- **EVA55109** Complete TSFI Kit ............................................................... **$263.00**
- **EVA55109F** TSFI Administration & Scoring Forms (100) .......................... **$40.00**
- **EVA55109M** TSFI Manual ....................................................................... **$60.00**

**The Scale of Sensory Strategies Tool Kit (S.O.S.S.)**

The S.O.S.S. Tool Kit is a program that categorizes sensory input into 3 classifications as Preparatory, Functional, or Transitional, and sorts over 70 strategies per the primary sensory area that each one impacts. It provides a data collection form or scale that enables a therapist to develop a therapy plan through direct observation, teacher and/or parent report to record and assess the impact of applied strategies via measurable and observable targeted behaviors. This information is automatically compiled into a Therapy Report that gives an overview of the individual’s responses to effectively select treatment strategies for the classroom, clinic or home setting. This is done through the automatic generation of a Sensory Strategy Plan that lists only those sensory strategies that had a positive or desired impact on the child or individual’s behaviors during the data collection trials. This plan provides an evidence-based plan of care with sensory strategies that caregivers or providers can utilize in a designated way as either a Preparatory, Functional or Transitional strategy during the teaching of an academic or functional skill.

**COMPLETE KIT INCLUDES:** The Scale of Sensory Strategies Manual, Sensory Strategy Software CD, 10 sets of Long Form A for Data Collection and 10 sets of Short Form B for Data Collection.

- **THS42701** Complete S.O.S.S. Kit .......................................................... **$112.00**
- **THS42702** S.O.S.S. Long Form A (20) ...................................................... **$40.00**
- **THS42703** S.O.S.S. Short Form B (20) ....................................................... **$29.00**
- **THS42704** S.O.S.S. Manual ................................................................. **$55.00**

**DeGangi-Berk Test of Sensory Integration (TSI)**

The DeGangi-Berk Test of Sensory Integration (TSI) makes it easier to identify sensory integrative dysfunction in young children. Sensitive to even subtle developmental deficits, it permits early detection of problems that could lead to learning difficulties if left untreated.

Designed for use with 3- to 5-year-old children, the TSI includes 36 items measuring overall sensory integration as well as three clinically significant domains: Postural Control, Bilateral Motor Integration, and Reflex Integration. These vestibular-based functions are essential to the development of motor skills, visual-spatial and language abilities, hand dominance, and motor planning.

TSI items require the child to perform specific tasks or respond to various stimuli. The test can be individually administered and scored in just 30 minutes. The therapist simply rates the child’s performance on each item, using a numerical scale ranging from “abnormal” to “normal” development. In addition to a total score, the TSI provides scores for each of the three subdomains measured. Cutoff points allow you to quickly compare the child’s performance with that of normal, at risk, and deficient youngsters.

The TSI effectively differentiates normal and developmentally delayed children. When used as the basis for screening decisions, total scores demonstrate an 81% accuracy rate, with a false normal error rate of only 9%.

**COMPLETE KIT INCLUDES:** 1 Set of Test Materials; 25 Star Design Sheets; 25 Protocol Booklets; 1 Manual.

- **EVA55110** Complete TSI Kit ............................................................... **$263.00**
- **EVA55110DS** TSI Star Design Sheet (100) ............................................. **$40.00**
- **EVA55110PB** TSI Protocol Booklet (25) .................................................. **$40.00**
- **EVA55110M** TSI Manual ................................................................. **$60.00**

**Observations Based on Sensory Integration Theory**

Skilled observations of sensory integrative functions offer a therapist the tools to discreetly analyze a child’s behavior and skills, and as a result, develop more effective intervention plans.

Occupational therapists and other related allied health professionals specializing in pediatrics will find this multi-media product to be a valuable resource. The two videos and workbook can be utilized for a broad range of children of varying ages and skill levels and in a variety of settings. Both videos are 30 minutes each. The Workbook provides a table of observations, normative information, definition of terms, references, and worksheets.

The viewer will observe children with identified difficulties and listen to the clinical reasoning of master clinician, Dr. Erna Imperatore Blanche, as she interprets and compares these children’s skills and behaviors through the use of split screen techniques and in-depth discussion. This set is an excellent way for occupational therapists to develop skills in non-standardized assessment.

- **PP3106** Observations Based on Sensory Integration Theory .................. **$140.00**
Goal-Oriented Assessment of Lifeskills (GOAL)

An innovative new evaluation of functional motor abilities needed for daily living. Designed for children 7 to 17, the GOAL consists of seven Activities, fun and motivating tasks based on real occupations of a child’s daily life. This standardized, psychometrically precise instrument offers an valid description of a child’s competencies and opportunities for growth in both fine and gross motor domains.

**FINE MOTOR ACTIVITIES:**
- **Utensils:** Using a knife, fork, and spoon;
- **Locks:** Opening keyed and combination padlocks;
- **Paper Box:** Coloring, cutting, folding;
- **Notebook:** Organizing/filling a 3-ring binder

**GROSS MOTOR ACTIVITIES:**
- **Clothes:** Putting on/taking off T-shirt & shorts;
- **Ball Play:** Bouncing and kicking a ball;
- **Tray Carry:** Carrying a tray, avoiding obstacles

**COMPLETE KIT INCLUDES:**
- 1 Set of Test Materials; 25 Record Forms; Pad of 25 Paper Box Sheets; Stimulus Easel; and Manual.
- **EVA55117** Complete GOAL Kit ........................................... $371.00
- **EVA551171** GOAL Record Forms ....................................... $56.00
- **EVA551172** GOAL Paper Box Sheets (25) .......................... $28.00
- **EVA551173** GOAL Stimulus Easel ...................................... $81.00
- **EVA551174** Manual .......................................................... $81.00
- **EVA551175** Backpack ...................................................... $24.00

Social Profile: Assessment of Social Participation in Children, Adolescents and Adults

Based on the natural social development of children, adolescents, and adults, the Social Profile is a psychological instrument designed to assess behavioral interactions.

The Social Profile is designed to assess whether groups and individuals interact appropriately for their developmental stage and the activity in which they are engaged. This new instrument allows therapists, group leaders, and teachers with training in behavior observation to assess specific behaviors across five levels of participation and cooperation.

The full Social Profile has 40 items, divided into three topics of Activity Participation, Social Interaction and Group Membership/Roles. There are two versions of the Social Profile, the Children’s Version and the Adult/Adeoscent Version. The first three levels of the Adult/Adolescent Version make up the Children’s Version which has 27 items.

Results give both a general overview and detailed measurement of social cooperative behaviors. Scores are graphed, averaged, and interpreted by developmental categories. The Manual includes 14 case studies that illustrate the use of the Social Profile. Downloadable and writable versions of both the Children’s and the Adult/Adolescent versions are contained on a flash drive, along with a group-participation observation sheet.

**EVA67701** Test Kit: Manual and Flash Drive with all Forms ........ $140.00

Sensory Integration Inventory Revised for Individuals with Developmental Disabilities

Appropriate for all ages, this Inventory and accompanying User’s Guide is a preliminary assessment for occupational therapists who serve people with developmental delays and disabilities. It is designed to screen for clients who might benefit by a sensory integration treatment approach. Since these behaviors are not addressed in standardized assessments and the behaviors themselves interfere with formal test taking skills, this is an effective and appropriate tool for this population. This tool provides information on the subject’s sensory processing abilities and specific self-stimulating or self-injurious behaviors.

The Inventory is divided into sections associated with sensory integrative processing: tactile, vestibular, proprioceptive, and general reactions. In each section behaviors suggestive of sensory needs are listed as well as the self-stimulatory or self-injurious behavior associated with that system.

The User's Guide gives a rationale for the inclusion of each item in the Inventory as an indicator of sensory integrative dysfunction. It also provides an alternative, sensory explanation for behaviors that are often presumed to be primarily psychosocial in origin.

**EVA4403** Inventory & User’s Guide ........................................ $19.95
**EVA4404** Scoring Forms (20) ................................................. $14.95

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Developmental Test of Visual Perception— 3rd Edition (DTVP-3)

The DTVP-3 is a battery of six subtests that measure different but interrelated visual-perceptual and visual-motor abilities. The battery has empirically established reliability and validity.

The DTVP-3 can be administered by psychologists, neuropsychologists, occupational therapists, physical therapists, regular and special educators, and diagnosticians who are interested in examining the visual-perceptual status and visual-motor integration skills of adolescents and adults.

It is a comprehensive measure of visual perception that reliably differentiates visual-perceptual problems from visual-motor integration deficits. The DTVP-3 consists of 6 subtests including Copying, Figure-Ground, Visual-Motor Search, Visual Closure, Visual-Motor Speed, and Form Constancy. The DTVP-3 is especially useful in the evaluation of the neuro-psychological integrity of TBI and stroke patients where right hemisphere function may be at issue. It has sufficient easy items to allow accurate assessment of even individuals with severe TBI and other neurological impairments.

The DTVP-3 is particularly useful in distinguishing true visual-perceptual deficits from problems solely with complex eye-hand or perceptual-motor actions. The DTVP-A may also assist in differential diagnosis of various of the dementias in elderly patients, providing a baseline for normal aging changes in perception and perceptual-motor skills against which the referred patient may be referenced.


- Complete DTVP-3 Kit: $270.00
- DTVP-3 Copying Scoring Template: $10.00
- DTVP-3 Examiner Record Book (25): $41.00
- DTVP-3 Examiner’s Manual: $79.00
- DTVP-3 Picture Book: $73.00
- DTVP-3 Response Booklet (25): $86.00

Developmental Test of Visual Perception—Adolescent and Adult (DTVP-A)

The DTVP-A is a battery of six subtests that measure different but interrelated visual-perceptual and visual-motor abilities. The battery has empirically established reliability and validity.

The DTVP-A can be administered by psychologists, neuropsychologists, occupational therapists, physical therapists, regular and special educators, and diagnosticians who are interested in examining the visual-perceptual status and visual-motor integration skills of adolescents and adults.

It is a comprehensive measure of visual perception that reliably differentiates visual-perceptual problems from visual-motor integration deficits. The DTVP-A consists of 6 subtests including Copying, Figure-Ground, Visual-Motor Search, Visual Closure, Visual-Motor Speed, and Form Constancy. The DTVP-A is especially useful in the evaluation of the neuro-psychological integrity of TBI and stroke patients where right hemisphere function may be at issue. It has sufficient easy items to allow accurate assessment of even individuals with severe TBI and other neurological impairments.

The DTVP-A is particularly useful in distinguishing true visual-perceptual deficits from problems solely with complex eye-hand or perceptual-motor actions. The DTVP-A may also assist in differential diagnosis of various of the dementias in elderly patients, providing a baseline for normal aging changes in perception and perceptual-motor skills against which the referred patient may be referenced.


- Complete DTVP-A Kit: $251.00
- DTVP-A Examiner’s Manual: $90.00
- DTVP-A Picture Book: $71.00
- DTVP-A Profile/Examiner Record Forms (25): $39.00
- DTVP-A Response Booklets (25): $69.00

Wide Range Assessment Of Visual Motor Abilities (WRAVMA)

You no longer have to piece together different tests, standardized on different populations, in order to get a comprehensive evaluation of a child’s visual–motor skills. The WRAVMA lets you assess and compare visual–spatial, fine motor, and integrated visual–motor skills using norms gathered from the same sample. It assesses three areas using 5 tests:

- The Drawing Test measures visual–motor integration by asking the child to copy designs that are arranged in order of increasing difficulty.
- The Matching Test assesses visual–spatial skills by asking the child to look at a visual “standard” and select the option that “goes best” with it.
- The Pegboard Test evaluates fine motor skills by asking the child to insert as many pegs as possible, within 90 seconds, into a waffled pegboard.

The three areas were selected because of their relevance to school-related activities. Difficulties performing visual-motor tasks, such as copying form the chalkboard, drawing, or handwriting, can be linked to either fine motor deficits, spatial deficits and/or to an integration deficit when motor and spatial systems are combined.

Although each test can be used individually, all three tests can be administered in combination, yielding a comparison of a child’s integrated visual-motor ability with the skill area of visual-spatial and fine motor abilities.


- Complete WRAVMA Kit: $435.75
- WRAVMA Manual for Administration & Scoring: $83.75
- WRAVMA Drawing (Visual Motor) Forms (25): $83.75
- WRAVMA Matching (Visual Spatial) Forms (25): $83.75
- WRAVMA Examiner Record Forms (25): $83.75
- WRAVMA Pegboard and Pegs: $105.50
- WRAVMA Pencil/Marker Pack: $25.75

This highly acclaimed test measures visual-motor integration in children and adults. Backed by decades of research and clinical use, the Berry VMI offers a convenient and economical way to screen for visual-motor deficits that can lead to learning, behavior, and neuropsychological problems.

**DEVELOPMENTAL TEACHING ACTIVITIES:** A booklet of more than 250 activities for teachers and parents to use with children from birth through age 6 to help develop solid foundations for art, academics (including pre-reading and pre-writing), and athletic skills. At each level, activities are included for gross motor, fine motor, visual, and visual-motor development.

**MY BOOK OF SHAPES:** Contains 100 geometric paper and pencil exercises that preschool and kindergarten teachers and parents may use with children to refine motor, visual, and visual-motor activities development. The exercises help support early prevention of problems and provide an important foundation for the teaching of letter and numeral shapes in the first semester of kindergarten.

**BEERY VMI STEPPING STONES PARENT CHECKLIST:** A consumable checklist of more than 200 key developmental “stepping stones” designed to help parents note observations of children from pre-kindergarten through early elementary age in non-school settings. Parents may then share this information with teachers to help track developmental progress and design learning programs.

**DEVELOPMENTAL WALL CHART FOR VISUAL-MOTOR INTEGRATION:** A laminated full-color wall chart of basic gross, fine motor, visual, and visual-motor developmental “stepping stones” from birth to age 6. Serves as a handy reminder for parents and professionals.

**BEERY VMI 6TH EDITION STARTER KIT INCLUDES:** Manual, 10 Full Forms, 10 Short Forms, 10 Visual Perception Forms, and 10 Motor Coordination Forms.

**TEACHING MATERIALS STARTER KIT INCLUDES:** My Book of Shapes, My Book of Letters and Numbers, Developmental Teaching Activities, Developmental Wall Chart and Stepping Stones Parent Checklist (25 per package).

**Test of Visual Motor Skills—3rd Edition (TVMS-3)**

This brand-new revision of the TVMS assesses how well a person can coordinate visually guided fine-motor movements to copy a design while it is in sight. The TVMS-3 is used to determine whether there are any systematic distortions or gross inaccuracies in the copied design that could be the result of deficits in visual perception, motor planning, and/or execution.

The TVMS-3 utilizes a greatly simplified scoring system. A single test now replaces the two levels of the previous version (TVMS-R and TVMS-UL), making it both easier to administer and more economical.

Analysis of the types of errors made provides a detailed evaluation of visual-motor skills. Results can be reported as standard scores, percentile ranks, or age equivalents.

**COMPLETE KIT INCLUDES:** Manual, 15 Test Booklets, 15 Record Forms in a storage case with handle.


The TVPS-4 is the latest update of the standard comprehensive assessment of visual analysis and processing skills. The TVPS is used by many professionals, including occupational therapists, learning specialists, optometrists, and school psychologists.

The TVPS-4 remains an easy-to-use assessment for determining visual-perceptual strengths and weaknesses. Norms are based on a nationally representative sample. Additional lower-level items were added to address the needs of younger or more impaired individuals, making the TVPS-4 useful for a wider range of examinees.

The TVPS-4 utilizes the 112 black and white designs from the TVPS-3, plus an additional 14 new images. The new images were added to expand the range of easier items and improve the discriminative ability of the test for younger or more impaired individuals.

**COMPLETE KIT INCLUDES:** Manual, Test Plates and 25 Record Forms.
Motor-Free Visual Perception Test-4 (MVPT-4)

The MVPT-4 is the most recent revision of the only nonmotor visual-perceptual assessment that can be used throughout the life span. The MVPT-4 provides a quick, reliable, and valid measure of overall visual perceptual ability in children and adults. The MVPT-4 includes 45 items from the MVPT-3 which have been reorganized and grouped for easier administration. The MVPT-4 is designed to be used for screening and research purposes by psychologists, occupational therapists, educational specialists, optometrists, and others who may need to determine a person’s overall ability to discern and understand visual stimuli.

The MVPT-4 takes 20–25 minutes to administer. Test plates are contained in one easy-to-use book with an easel back. Test administration cues are provided in the test plates to facilitate administration. Scoring is extremely easy; no basals or ceilings are used. The raw score is quickly converted to one overall standard score and percentile rank.

The MVPT-4 assesses five categories of visual perception:

- **Visual Discrimination:** Ability to discriminate dominant features of different objects, including the ability to discriminate position, shapes, and forms
- **Spatial Relationship:** Ability to perceive the positions of objects in relation to oneself and to other objects
- **Visual Memory:** Ability to recognize a previously presented stimulus item after a brief interval
- **Figure—Ground:** Ability to distinguish an object from background or surrounding objects
- **Visual Closure:** Ability to perceive a whole figure when only fragments are presented

**COMPLETE KIT INCLUDES:** Manual, Test Plates, and package of Record Forms.

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Koppitz Developmental Scoring System for the Bender Gestalt Test (Koppitz-2)

The KOPPITZ-2 is a highly reliable, valid measure of visual-motor integration skills that applies the developmental approach to scoring made so popular by its originator, Dr. Elizabeth Munsterberg Koppitz.

The new KOPPITZ-2 assesses the ability to relate visual stimuli accurately to motor responses and to organize the drawing task independently. It does so using a less structured task than other tests, thereby providing a more ecologically sound approach to assessment of visual-motor integration skills relative to highly structured drawing tasks.

More clinically useful than ever, the KOPPITZ-2 can help you determine the presence and degree of visual–motor problems; identify candidates for remediation or visual–motor training; monitor progress in cases of acute injury or degenerative disease; and evaluate the effectiveness of intervention efforts.

**COMPLETE KIT WITH BENDER CARDS INCLUDES:** Examiner’s Manual, Bender Gestalt II Stimulus Cards, 25 Examiner Record Forms, and a Scoring Template, all in a sturdy storage box.

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Slosson Visual-Motor Performance Test (S-VMPT)

The Slosson Visual-Motor Performance Test (S-VMPT) measures the ability to interpret and translate visually perceived geometric patterns using hand-motor responses. Individuals are asked to copy geometric figures 3 times, increasing in complexity, without the use of a ruler, compass, or other aids.

The S-VMPT is one of the only measures of visual–motor integration, yielding standard scores and developmental age scores. The S-VMPT is designed as a screening test to identify individuals with serious perceptual organizational problems involving eye-hand coordination.

Based on the popular Slosson Drawing Coordination Test (SDCT), the S-VMPT includes new, upper-end geometric items, and a higher ceiling for the adult population. Record Forms have been re-designed for easier use, and greater reliability. Score Forms show all stimuli on one page, and allow space to write observations.

Administration is quick and easy. The individual is asked to copy as many figures as possible, which are then scored “1” or “0”, based on scoring guidelines. The comprehensive Manual includes scoring guidelines and examples that allow the examiner to practice the scoring procedure before administering a single test.

The S-VMPT yields both standard scores and developmental age scores for children and adults. It is highly reliable for all ages.

**COMPLETE KIT INCLUDES:** Manual, 25 Record Forms and 25 Score Forms.

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Full Range Test Of Visual Motor Integration (FRTVMI)

For use by psychologists, educational diagnosticians, learning disability specialists, OTs and Pts, as well as teachers and counselors, the Full Range Test of Visual-Motor Integration (FRTVMI) is a highly reliable, valid measure of visual-motor integration skills that not only covers the full range of school ages but, unlike most other tests of VMI, includes norms appropriate for special education students in the 19-21 year age range.

The FRTVMI assesses the ability to accurately relate visual stimuli to motor responses by asking subjects to copy a series of increasingly complicated designs. Unique among visual-motor integration tests, it gives the clinician a highly reliable, valid and unbiased measure to assessing individuals with a wide range of visual-motor ability.

The FRTVMI is unique among visual-motor integration tests because it gives the clinician a highly reliable, valid, and unbiased measure for assessing individuals with a wide range of visual-motor ability. This is a highly useful, highly regarded test that clinicians and researchers can use in a variety of ways.

**COMPLETE KIT INCLUDES:** Examiners manual, 25 Profile/Examiner Record Forms for 5-10, 25 Profile/Examiner Record Forms for 11-74, and a Scoring Transparency, all in a sturdy box.

- **EVA1440** Complete FRTVMI Kit $213.00
- **EVA1443** FRTVMI Manual $67.00
- **EVA1441-25** FRTVMI Profile/Exam Record Form (ages 5-10) (25) $75.00
- **EVA1441-100** FRTVMI Profile/Exam Record Form (ages 5-10) (100) $224.00
- **EVA1442-25** FRTVMI Profile/Exam Record Form (ages 11-74) (25) $75.00
- **EVA1442-100** FRTVMI Profile/Exam Record Form (ages 11-74) (100) $224.00
- **EVA1444** FRTVMI Scoring Transparency $10.00

Jordan Left-Right Reversal Test—3rd Edition (JORDAN-3)

The Jordan Left-Right Reversal Test helps clinicians identify students who have difficulty with reversals, and what types of reversals are problematic: objects, letters, numbers, words or letter sequences. Reversals are a major stumbling block for students learning to read. The Jordan-3 may be beneficial to add to a battery of tests when assessing AD/HD.

The Jordan-3 now has two parts (children ages 5-8 take only Part 1) consisting of five subtests, in developmental sequence. The first and last subtests are new. A Remedial Checklist provides suggested remediation activities.

The JLRRT-3 can be administered to individuals or small groups. Two scores are derived. Correct Responses (reversals correctly identified) and Errors (nonreversed items that were incorrectly identified as reversals, plus reversals that were not identified). Both scores are converted to percentile ranks and interpreted using cutoff scores based on score frequencies in the normative sample. Age equivalents are also provided.

Two overall scores are provided: Correct Responses and Errors. In addition, Laterality Checklists allow you to evaluate the child’s preference for one side of the body for unilateral tasks. Once the child has settled on a lateral preference, it is easier to remediate letter reversals.

This revised third edition provides an accurate and cost-effective way to screen for learning problems and plan remediation.


- **EVA53116** Jordan Left/Right Reversal Test Kit $130.00
- **EVA53117** Jordan Left/Right Reversal Test Manual $50.00
- **EVA53118** Jordan Reversal Test Record Forms (25) $40.00
- **EVA53119** Jordan Reversal Test Remedial Checklists (25) $20.00
- **EVA53120** Jordan Reversal Test Laterality Checklist (25) $20.00

Preschool Visual Motor Integration Assessment (PVMIA)

At last, a standardized test specifically devoted to the perceptual abilities of the preschooler. Specific skills addressed by the PVMIA include: perception of position in space, awareness of spatial relationships, color and shape discrimination, matching two attributes simultaneously, and the ability to reproduce what is seen and what is interpreted.

The PVMIA consists of two subtests: a Drawing subtest (8 items), which examines the ability to recognize and reproduce lines and shapes on paper, and a Block Patterns subtest (25 items), which examines the ability to recognize color and shape using three-dimensional blocks and to recognize and reproduce patterns created by assembling the same blocks. The drawings used in the Drawing subtest are novel to children and developmental in nature. The Block Pattern Subtest uses parquetry blocks that fit small hands rather than the one inch cubes typically used in other tests. The test items are presented in order of increasing difficulty.

In addition, there are two Behavioral Observation Checklists which assist in the interpretation of the test results. Raw scores are converted to Standard Scores and Percentile Ranges for each of the Subtests and for the Total Test. Now includes scoring software to assure scores are correct - just type the numbers in and leave the calculating to the software!

**COMPLETE KIT INCLUDES:** Manual, 20 Record Forms, Test Plates, Shapes Blocks (14), Scoring Tools (Templates, Ruler, Primary Pencil, Screen), and a Vinyl Case. Now includes scoring software to assure scores are correct.

- **EVA1501K** Complete PVMIA Kit $195.00
- **EVA1501** PVMIA Manual $45.00
- **EVA1502** PVMIA Test Plates $80.00
- **EVA1503** PVMIA Record Forms (20) $25.00
- **EVA1504** PVMIA Scoring Tools $18.50
- **TP1501** PVMIA Shape Blocks (Set of 14) $15.00
- **EVA4507** PVMIA ScoreMaker CD $19.50

For a more detailed description of these evaluations, please visit our website: [www.therapro.com](http://www.therapro.com)
**Spatial Awareness Skills Program (SASP)**

The Spatial Awareness Skills Program (SASP) assesses and teaches the fundamental analysis and organization abilities that enable children to make sense out of arithmetic and, more generally, to address written work and multistep listening and reading comprehension tasks in an efficient, step-by-step fashion.

SASP is an updated, expanded version of the visual skills component (Blue Book) of PREP. PREP focused on analysis skills; SASP focuses on analysis and organization skills.

SASP is intended for use by occupational therapists, developmental optometrists, and teachers who work with pre-kindergarten through elementary-school-age LD, ADD, or dyslexic children, individually or in groups. SASP consists of two components: the Test, which enables you to identify and determine the performance (instructional) level of those children who lack adequate spatial awareness skills; and the Curriculum, which provides methods for training those skills.

The Curriculum is divided into two major sections: activities to improve spatial analysis and organizational skills, and activities to teach the words (verbal organizers) that support this process. Many of the activities are accompanied by worksheets that may be given to parents for supplemental use at home.


- **EVA526116** Complete SASP Program .......................... $139.00
- **EVA526117** SASP Student Response Booklets (25) ........ $56.00

**McDowell Vision Screening Kit**

With the McDowell Vision Screening Kit, you can test virtually any child for vision problems—even very young and severely disabled children who are too inattentive, difficult, or impaired to evaluate with conventional vision screeners. This unique test lets you assess the functional vision of children previously considered untestable. Convenient, quick, and economical, the McDowell provides a complete evaluation. It gives you a behavioral assessment of visual performance in five areas: Distance Visual Acuity, Near-Point Visual Acuity, Ocular Alignment and Motility, Color Perception, and Ocular Function.

The procedures used in the McDowell Vision Screening Kit consistently identify children with the three most common and correctable vision problems: refractive errors, ocular alignment dysfunction, and amblyopia. Virtually all children, regardless of their developmental level, can complete these procedures.

Studies reported in the Manual—based on 181 children from 2.9 to 5.4 years of age, from varied cultural and socioeconomic backgrounds, with IQs from the intellectually disabled range to gifted—demonstrate that the McDowell is valid, accurate, and reliable. Test–retest reliability coefficients range from .89 to 1.00. And correlations between McDowell scores and results of standard vision screening procedures range from .90 to 1.00. In addition, vision problems identified by the McDowell were later confirmed by licensed eye-care specialists.

The McDowell Kit contains all the toys, objects, and recording forms you need to do a comprehensive screening.

**COMPLETE KIT INCLUDES:** all test materials, 100 Recording Forms and Manual.

- **EVA55114** Complete McDowell Vision Screening Kit ........ $212.00
- **EVA55115** McDowell Vision Screening Recording Forms (100) .......................... $48.00
- **EVA55116** McDowell Vision Screening Manual .................. $70.00

**NAB Visual Discrimination Test**

The NAB Visual Discrimination Test, a stand-alone component of the Neuropsychological Assessment Battery (NAB), can be used to assess visual perception in adults without the demands of motor output.

- Eighteen-item task requires the examinee to match a target visual design from an array of four similar designs.
- Colorful abstract designs maintain examinee engagement.
- A detailed Record Form guides you through the measure, making it quick, efficient, and easily portable for use in a variety of settings.
- Equivalent, parallel forms allow for ease of retesting and reduce the likelihood of practice effects.

This test evaluates deficits in visual perception using stimuli that are not amenable to verbal encoding. Administration of the assessment is brief and straightforward, using a match-to-target paradigm that is commonly used to measure visual perception and visual-spatial skills. The paradigm requires the examinee to match a target visual design from an array of four similar designs presented beneath the target.

The NAB was standardized on a national sample of 1,448 adults. The test takes 10–15 minutes to administer. Scores are expressed as Z-scores, T-scores, and percentile ranks. There are two equivalent forms, allowing re-administration without concern about practice effects.

**COMBINATION KIT INCLUDES:** NAB Visual Discrimination Test Professional Manual, 25 Form 1 Record Forms, 25 Form 2 Record Forms, Form 1 Stimulus Book, and Form 2 Stimulus Book.

- **EVA40172** NAB Combination Kit .................................. $261.00
- **EVA40176** NAB Form 1 Record Form (25) ....................... $39.00
- **EVA40177** NAB Form 2 Record Forms (25) ................. $39.00
Kinetic Drawing System for Family and School

The Kinetic Drawing System for Family and School combines two projective techniques (Kinetic Family Drawing and Kinetic School Drawing) to create a single, comprehensive procedure for evaluating children and adolescents. It gives clinicians and school psychologists a simple, cost-effective way to assess children’s perceptions of important relationships at home and at school. Unlike other projective drawing techniques, which generally yield static portraits, the kinetic approach focuses specifically on the child’s interaction with others. Kinetic Family Drawing asks the child to draw his or her family doing something, while Kinetic School Drawing asks for a picture of the child interacting with relevant school figures. The introduction of action increases the diagnostic information available in the drawings, providing more insight into the child’s feelings and functioning.

Because the Kinetic Drawing System addresses both family and school settings, it is an effective way to determine the pervasiveness of the child’s problems.

**COMPLETE KIT INCLUDES:** 1 Manual and 25 scoring booklets; the Handbook includes Manual with a sample of the Scoring Booklet.

- EVA55111 Kinetic Drawing System Kit .............................................. $113.00
- EVA55113 Scoring Booklets (25) ...................................................... $54.00

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The Carolina Curriculum for Infants & Toddlers with Special Needs—3rd Edition (CCITSN)

The Carolina Curriculum for Infants and Toddlers with Special Needs is designed for the assessment and teaching of children with mild to severe special needs from birth to 36 months’ developmental age. The volume first takes users step-by-step through the assessment process - from setting up to scoring and charting assessment results - with a sample Assessment Log.

The curriculum itself is divided into 24 logical teaching sequences covering five developmental domains: cognition, communication, social adaptation, fine motor, and gross motor. Once the initial assessment is complete, professionals select curricular items that correspond to each child’s special needs. Each curricular item follows the same format: title, objective, materials needed, teaching procedures, routine integration strategies, and sensorimotor adaptations. The uncomplicated format and jargon-free language make CCITSN easy to use and easy to share with families.

- EVA40701 Infant/Toddler Curriculum, 3rd Ed .................................... $55.00
- EVA40703 Infant/Toddler Log/Progress Chart (10) .......................... $30.00

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The Carolina Curriculum for Preschoolers with Special Needs—2nd Edition (CCPSN)

The Carolina Curriculum for Preschoolers with Special Needs is designed for the assessment and teaching of children with mild to severe special needs from 2 to 5 years’ developmental age. The natural follow-up to The Carolina Curriculum for Infants and Toddlers with Special Needs. The volume first takes users step-by-step through the assessment process - from setting up to scoring and charting assessment results - with a sample Assessment Log.

The curriculum itself is divided into 22 logical teaching sequences covering five developmental domains: cognition, communication, social adaptation, fine motor, and gross motor. Once the initial assessment is complete, professionals select curricular items (there are more than 400) that correspond to each child’s special needs. As in CCITSN, each curricular item follows the same format: title, objective, materials needed, teaching procedures, routine integration strategies, and sensorimotor adaptations. The uncomplicated format and jargon-free language make CCPSN easy to use and easy to share with families.

- EVA40702 Preschool Curriculum, 2nd Ed ...................................... $55.00
- EVA40704 Preschool Log/Progress Chart (10) .............................. $30.00

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Developmental Profile 3 (DP-3)

The DP-3 includes 180 items, each describing a particular skill. The respondent simply indicates whether or not the child has mastered the skill in question. It provides a General Development score as well as scale scores. Because the DP-3 is comprehensive, it makes routine screening feasible. You can administer the test to large groups of children knowing that it will alert you to any significant problems that may be present.

The DP-3 is an excellent way to identify developmental strengths and weaknesses early in a child’s life. Its norm-based standard scores allow you to compare children’s functioning with that of their peers, design interventions that meet their particular needs, and monitor their progress over time.

Provided on an unlimited-use CD, the DP-3 computer program saves time, reduces the chance of error, and provides both scoring and interpretation. It gives you highly useful reports.

**COMPLETE KIT INCLUDES:** 25 Interview Forms, 24 Parent/Caregiver Checklists and Manual.

- EVA55138 Complete DP-3 Kit ................................................................ $301.00
- EVA55150 Complete DP-3 Kit with DP-3 CD .................................... $521.00
- EVA55139 DP-3 Interview Form (25) .............................................. $105.00
- EVA55140 DP-3 Parent/Caregiver Checklist (25) ......................... $105.00
- EVA55141 DP-3 Manual .................................................................. $111.00
- EVA55151 DP-3 CD ................................................................... $367.00

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For a more detailed description of these evaluations, please visit our website: www.therapro.com
Developmental Assessment of Young Children—2nd Edition (DAYC-2)

The DAYC-2 is a popular test used to identify children with possible delays in the following domains: cognition, communication, social-emotional development, physical development, and adaptive behavior.

Each of the five domains reflects an area mandated for assessment and intervention for young children in IDEA. The domains can be assessed independently, so examiners may test only the domains that interest them or test all five domains when a measure of general development is desired.

The DAYC-2 format allows examiners to obtain information about a child’s abilities through observation, interview of caregivers, and direct assessment. The DAYC-2 may be used in arena assessment so that each discipline can use the evaluation tool independently.

The DAYC-2 was normed on a national sample of 1,832 children; characteristics of the normative sample approximate the 2010 census. Standard scores, percentile ranks, and age equivalents are provided for each domain, and for overall general development if all five domains are tested.

COMPLETE KIT INCLUDES: Examiner’s Manual; 25 each of five different Scoring Forms; a 25 Mini Poster-Pack of Early Child Development Chart, 3E; and 25 Examiner Summary Sheets, all in a storage box.

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Developmental Assessment for Individuals with Severe Disabilities—3rd Edition (DASH-3)

The DASH-3 is a criterion-referenced measure of specific skill levels in persons of all ages who have severe and/or multiple physical/sensory disabilities, including persons with severe and profound intellectual disability (“mental retardation”) and autism spectrum disorders. The scales are also appropriate for individuals with mild to moderate disabilities; those who have single disabling conditions (e.g., individuals with visual impairment or paraplegia), and children who are functioning chronologically from birth to 6 years of age.

Because the DASH-3 items identify specific behaviors and scoring criteria describe graduated levels of support, it may be used to track progress with targeted skills, so that timely changes may be made to the individual’s intervention program.


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Goal-Oriented Assessment of Lifeskills (GOAL)

The Goal-Oriented Assessment of Lifeskills (GOAL) is an innovative new evaluation of functional motor abilities needed for daily living. Designed for children 7 to 17, the GOAL consists of seven Activities, fun and motivating tasks based on real occupations of a child’s daily life. Each Activity is linked to Intervention Targets that help you turn assessment results into a specific, goal-oriented treatment plan. This standardized, psychometrically precise instrument offers an ecologically valid description of a child’s competencies and opportunities for growth in both fine and gross motor domains.

The GOAL can help determine eligibility for special services and inform planning of occupational and/or physical therapy and adaptive physical education. It’s useful in a variety of settings, including schools, clinics, hospitals, and private practice. Although intended primarily for occupational therapists, it can be used by other professionals, including psychologists, physical therapists, and other childhood intervention specialists.

In this individually administered assessment, the child performs seven Activities representing a range of functional tasks. Dr. A. Jean Ayres’ sensory integration theory describes many of the key concepts underlying the GOAL Activities. This theory proposes that processing of sensory inputs provides a foundation for development of cognitive and motor skills.

COMPLETE KIT INCLUDES: 1 Set of Test Materials; 25 Record Forms; Pad of 25 Paper Box Sheets; Stimulus Easel; and Manual.

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<td>EVA551175</td>
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Fine Motor Skills in the Classroom: Screening & Remediation Strategies

This hand skills program was developed as a tool to facilitate consultation in the classroom. Both the teacher’s and students’ needs can be addressed without a lengthy referral process. The effects of this program on teachers, administrators and students have been profound. Students with hand skills problems can be identified using a simplified, more efficient and less costly process. In addition, teachers and administrators have recognized the value of occupational therapy for teaching hand skills and other skills needed for classroom performance.

The manual consists of training modules, a screening to administer to an entire class, report formats for teachers and parents, and classroom and home remediation activities. Designed to include everyone involved in the education process and to make them aware of the opportunities offered by occupational therapy in the classroom. 96 pages.

**Purpose:** An effective screening tool for assessing hand skill development in the school environment

**Ages:** 5 to 8 years

**Author:** Jayne Berry, OTR/L

Test of Gross Motor Development—3rd Edition (TGMD-3)

The TGMD-3 has two subtests. The first subtest, Locomotor, measures the gross motor skills that require fluid coordinated movements of the body as the child moves in one direction or another. The second subtest, Ball Skills, measure gross motor skills that demonstrate efficient throwing, striking, and catching movements.

The TGMD-3 provides an overall composite score (Gross Motor). The two subtest scaled scores are combined to form the Gross Motor composite. The Examiner’s Manual discusses the test’s theoretical and research-based foundation, item development, standardization, administration and scoring procedures, normative tables, and guidelines for using and interpreting the test’s results.

**Purpose:** Combines fun activities with a reliable and valid procedure that gives meaningful results in identifying children with gross motor problems

**Ages:** 3-0 to 10-11 years

**Admin Time:** 15-20 minutes

**Author:** Dale Ulrich

Quick Neurological Screening Test-3R (QNST-3R)

The QNST-3R is an individually administered, empirically based assessment of the development of motor coordination and sensory integration (both of which have been shown to relate to learning as well as to general daily functioning), seen as neurological soft signs (NSS). NSS are minor irregularities that include poor motor coordination, sensory perceptual changes, and difficulty sequencing complex motor tasks. The presence of NSS can indicate neuro trauma and are often harbingers of learning difficulties (without history of trauma).

**NOTE:** The QNST-3 Forms are NOT compatible with the QNST-3R

**COMPLETE KIT INCLUDES:** Manual, 25 Record Forms, and 25 Remedial Guidelines Forms, all neatly stored in a vinyl folder.

**Purpose:** Documents the presence of neurological soft signs which are thought to indicate delays or reduced cortical neural connectivity

**Ages:** 4 to 80+ years

**Admin Time:** 20-30 minutes

**Authors:** Margaret Mutti, MA, Nancy A. Martin, PhD, Harold Sterling, MD, Norma Spalding, EdD

Peabody Developmental Motor Scales—2nd Edition (PDMS-2)

The PDMS-2 is an early childhood motor development program that provides both an in-depth assessment and training or remediation of gross/fine motor skills for children from birth to 5 years. Scores include 1) a Gross Motor Quotient which is a composite of the Reflexes, Stationary, Locomotion and Object Manipulation subtests, 2) a Fine Motor Quotient, a composite of the Grasping and Visual-Motor Integration subtests, and 3) a Total Quotient, a combination of the gross and motor subtests.

**COMPLETE KIT INCLUDES:** an Examiner’s Manual, Guide to Item Administration, Picture Book, 25 Profile/Summary Forms, 25 Examiner Record Booklets, the Peabody Motor Activities Program Manual, a Black and White Peabody Motor Development Chart, and manipulatives, all in a sturdy storage box. The complete TEST does NOT include the Peabody Motor Activities Program Manual.

**Purpose:** Provides an in-depth assessment of gross & fine motor skills

**Ages:** Birth to 5 years

**Admin Time:** 45-60 minutes

**Authors:** M. Rhonda Folio & Rebecca R. Fewell
**Schooloodles School Fine Motor Assessment—4th Edition (SFMA)**

A comprehensive assessment for children age 3 and older. Occupational therapists are increasingly being asked to assist with RTI (Response to Intervention) screens in addition to assessing and determining need for service. The 4th Edition is packed with new information and tools that occupational therapists working in schools need for screens, evaluations and annual updates. Therapists will be able to understand and describe the underlying causes of fine motor challenges by referring to the detailed guidebook and the skill chart. Information gathering will be simple and structured using the updated clinical observation form and reproducible workbook pages.

**SCHOOLoodles SFMA 4TH EDITION INCLUDES:**
- Comprehensive Therapist Guide
- Student Workbook
- Goal Writing Template
- Teacher Consultation and Intervention Guide
- Classroom Observation Guide
- Clinical Observation Guide
- Skill Chart with Age Levels for Skill Attainment
- Pencil pouch to hold all of your materials for assessments

Available as a 3-ring binder with sturdy pages for reproduction and pencil pouch, or as a PDF on a CD for transportability.

- **EVA50304** Complete Schooloodles Test (3-Ring Binder version) .................. $95.00
- **EVA50305** Complete Schooloodles Test (CD version) .................. $85.00

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**Clinical Observations of Motor and Postural Skills—2nd Edition (COMPS)**

A screening tool based on 6 of the Clinical Observations developed by A.J. Ayres. It generates a score to help identify a number of subtle motor coordination problems in children.

COMPS offers standardized administration procedures and objective criteria for scoring. Easy to follow instructions and illustrations help therapists administer the test quickly and reliably in less than 15 minutes.

COMPS is appropriate for children ages 5 through 15. It can be used to screen groups of children. The authors’ caution that the COMPS is not designed for children with known neurological or neuromotor problems, such as CP or epilepsy, nor for children with general intellectual delay.

Includes Scoremaker software - just type in the numbers and let the software calculate the correct scores. ScoreCalculator software is Windows-compatible only.

**COMPLETE KIT INCLUDES:**
- Manual, scoring sheet (pack of 20)
- 2 ATNR measuring tools

- **EVA1505K** Complete COMPS Kit .......................................................... $100.00
- **EVA1506** COMPS Scoring Sheets (20) ............................................. $18.00
- **EVA1507** COMPS ATNR Measuring Tools .................................. $35.00
- **EVA1508** COMPS Manual ......................................................... $36.00
- **EVA4506** COMPS Scoremaker Software .................................. $19.50

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**Schooloodles School Keyboarding Assessment: An Assessment and Interpretation Tool for Keyboarding Skills**

Includes questions and answers school therapists ask themselves when trying to decide how best to help a student struggling with handwritten work. This new assessment is the result of in-depth research regarding how keyboarding fits into the scope of occupational therapy practice and includes a variety of activities to aide decision making.

Includes a Background Information Form, a Teacher Question Form, a Student Question Form and a detailed Record Sheet to gather information. In addition, there are typing samples to copy, links to timed tests and links to keyboarding programs for intervention. Forms are meant to be copied.

The workbook helps therapists compare handwritten work to work produced on a keyboard. There is an assessment of classroom skills and supporting skills needed to evaluate, decide on service, and create interventions to help students become successful keyboarders in school.

- **EVA50306** Schooloodles School Keyboarding Assessment .................. $65.00

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**Purdue Pegboard Test**

Aids in the selection of employees for various types of manual labor by measuring dexterity for two types of activity; gross movements of hands, fingers and arms, and fingertip dexterity as necessary in assembly tasks. Comes complete with pins, collars and washers and an examiner’s manual.

- **EVA70801** Purdue Pegboard Test ............................................. $140.00

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**O’Connor Tweezer Dexterity Test**

For eye/hand coordination test. Uses a tweezer to insert a pin into each hole. Resembles the FDT - Finger Dexterity test. Includes 100 pins tweezers and an examiner’s manual.

- **EVA70803** Tweezer Dexterity Test .......................................... $175.00

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**O’Connor Finger Dexterity Test**

For timed evaluation of rapid manipulation of small parts and coordination training. Pegboard is 11 1/2 x 5 7/8 * 100 holes. Pins are 1 long x 1/16 in diameter. Includes 300 pins and examiner’s manual.

- **EVA70804** Finger Dexterity Test .......................................... $175.00

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**Grooved Pegboard Test**

A test for the complex visual-motor coordination skills. Features 25 key-style pegs with holes in various positions in space. Excellent for testing lateralized brain damage.

- **EVA70802** Grooved Pegboard Test ..................................... $124.95
Here's How I Write: A Child's Self-Assessment and Goal Setting Tool

Here's How I Write (HHIW) is a different kind of assessment tool in which the student assesses his/her own handwriting and becomes an active participant in setting goals for improvement.

HHIW consists of a picture-card interview in which a child is presented with 24 cards, one at a time, sampling various aspects of handwriting. Nineteen of the 24 items relate to specific performance features of handwriting, such as staying on the lines, letter formation, and word spacing. Three letters, size of letters, use of correct case, use of page margins, ability to accurately copy, and automaticity. Two items involve the child's feelings about writing (affectionate items), including "I like to write," and "I feel that I write well," and three items relate to physical factors contributing to writing including body posture and stabilizing the page with the nonwriting hand.

HHIW targets children in second through fifth grade who are in need of Response to Intervention Tier 2 and Tier 3 intervention, or those referred for occupational therapy assessment for consideration of a related service as a result of handwriting difficulties.

COMPLETE KIT INCLUDES: Manual, 25 cards, 1 Forms Set all neatly stored in a hard plastic briefcase with handle.

FORMS SET INCLUDES: 10 Child's Self-Assessment Forms, 10 Teacher/Therapist Form, 10 Goal Setting Worksheets and Handwriting Improvement Plan

EVA1522 Here’s How I Write Kit..........................$100.00
EVA1522 Here’s How I Write Kit..........................$24.00

The Print Tool: The Tool to Evaluate & Remediate by Handwriting Without Tears

The Print Tool is a complete evaluation that includes student and school information, a review of school papers, and careful observation of the child's physical approach and fine motor skills. Administered individually, the Print tool evaluates capitals, numbers, lowercase letters, and seven specific handwriting components: memory, orientation, placement, size, start, sequence, and word spacing. When scored, the evaluation form shows exactly which letters/numbers and components are causing difficulty. Children get precisely the materials and strategies they need to remediate their specific difficulties.

This Fifth Edition has new updates that make the tool easier than ever! Simplified scoring - By simplifying the scoring process for spacing, and streamlining the components to assess printing, the assessment will be quicker and results will be easier to measure. Easier Remediation - Simply check what is needed on the new, easy-to-use remediation form. It also features new remediation tools and tech products to engage children and add another multisensory element to remediation suggestions.

COMPLETE KIT INCLUDES: The Print Tool® Guide Book, Measuring Tool, 3 Sets of Student Sample Worksheets (30), Evaluation Scoresheets (10), Handwriting Remediation Plan Forms (10)

REFILL PACKAGE INCLUDES: Student Worksheets Capitals/Numbers (Grades K-1) (25), Student Worksheets Lowercase (Grades K-1) (25), Older Student Worksheets (Grades 2+) (25), Evaluation Sheets (25), Remediation Sheets (25), Measuring Tool.

EVA1602 Complete Kit ...........................................$74.95
EVA1603 Refill Package............................................$34.95

Test of Handwriting Skills—Revised (THS-R)

This is an untimed standardized assessment of handwriting skills, both manuscript and cursive. It can be used with any of the popular handwriting programs. The changes to the new edition include: norms are extended through age 18 (manuscript and cursive), nationally stratified norms, a simplified scoring procedure, handwriting exemplars that reflect the current styles including D’Nealian, Handwriting Without Tears, Universal and Zaner Bloser and abbreviated administration procedures. The Manual now provides guidance on how the THS-R can be used for progress monitoring, also included is a video tutorial to assist practitioners in the scoring process. Subtest scores are reported as scaled scores and percentile ranks, and an overall standard score has been added.

COMPLETE KIT INCLUDES: manual, 15 manuscript test booklets, 15 cursive test booklets, 30 record forms, and training video.

EVA4244 Complete THS-R Kit .......................................... $170.00
EVA4245 THS-R Manual ............................................. $70.00
EVA4246 THS-R Manuscript Test Booklets & Individual Record Forms (15) ........................................ $40.00
EVA4247 THS-R Cursive Test Booklets & Individual Record Forms (15) ........................................ $35.00
EVA4248 THS-R Training Video ......................................... $20.00

Evaluation Tool of Children's Handwriting (ETCH)

The Evaluation Tool of Children's Handwriting is a basic resource for every school-based practitioner. Its focus is to assess a student's legibility and speed of handwriting tasks similar to those required of students in the classroom.

The ETCH evaluates the manuscript and handwriting skills of students in Grades 1-6. It assesses handwriting speed and legibility in writing tasks similar to those required of classroom students. Writing speed is measured in letters per minute and percentages of numeral, letter, and word legibility. Each writing task is scored and a Combined Score for all tasks is given.

ETCH results allow for easy documentation, a blueprint for intervention, integrated IEP goals and objectives, and a language to share with parents and school personnel.

THIS USER-FRIENDLY TEST KIT INCLUDES: reproducible score sheets and response booklets; quick reference sheets; wall charts; task sheets; scoring card; and 163-page Examiner’s Manual detailing test administration and scoring procedures for legibility.

EVA1601 Evaluation Tool of Children's Handwriting ................................................. $200.00

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Test of Early Communication and Emerging Language (TECEL)

The Test of Early Communication and Emerging Language (TECEL) assesses the earliest communication behaviors and emerging language abilities in infants and toddlers up to 24 months old. It is well-constructed, reliable, practical, research-based, and theoretically sound.

The TECEL is a revision and standardization of Mary Blake Huer's Nonspeech Test, a well-regarded assessment used with both typically developing young children and with older individuals with moderate-to-severe language delays.

It can be used to: (1) assess and chart communication and language strengths and weaknesses and design intervention plans, (2) make estimates about future language development, and (3) serve as a research tool for investigating early communication and emerging language.

The TECEL was normed on 558 children between the ages of 2 weeks and 24 months from 28 states. The sample is demographically representative according to U.S. Census projections for 2010. The TECEL evidences a consistently high degree of reliability related to content (94), time (87), and scorer differences (82). The TECEL possesses relatively little test error and provides strong qualitative and quantitative evidence of validity, including high correlations with age and cognitive and language abilities.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, Picture Plates, 25 Examiner Record Booklets, 25 Informal Assessment and Intervention Plans and an Object Kit, all in a sturdy storage box.

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<td>EVA526121</td>
<td>TECEL Examiner’s Manual</td>
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<td>EVA526122</td>
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Test for Auditory Comprehension of Language—4th Edition (TACL-4)

The latest revision of this popular, individually-administered test. It is a reliable and valid measure of a child's receptive spoken vocabulary, grammar, and syntax. The test measures children's ability to understand three language forms: Vocabular, Grammatical Morphemes, and Elaborated Phrases and Sentences.

Each item is composed of a word or sentence and a corresponding picture plate that has three full-color drawings. One of the three pictures for each item illustrates the meaning of the word, morpheme, or syntactic structure being tested. The other two pictures illustrate either two semantic or grammatical contrasts to the stimulus, or one contrast and one decoy. The examiner reads the stimulus aloud, and the subject is directed to point to the picture that he or she believes best represents the meaning of the word, phrase, or sentence spoken by the examiner. No oral response is required on the part of the subject.

The TACL-4 test items are ordered according to difficulty within each of the three subtests. Entry points, basal and ceiling rules for scoring are provided for each subtest. The Examiner’s Manual includes a comprehensive discussion of the test’s theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norms tables, and guidelines for using and interpreting the test’s results. Reliability and validity studies were conducted with individuals with normal language abilities and individuals who had previously been diagnosed with learning disabilities, ADHD, deaf/hard of hearing, articulation disorder, language impairment, autism spectrum disorder, intellectual disorder as well as those who have been identified as gifted and talented.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, Picture Book, and 25 Examiner Record Booklets, all in a sturdy storage box.

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Listening Comprehension Test—Adolescent Normative Update (LCT-A:NU)

The LCT-A: NU evaluates a student’s abilities in listening comprehension skills. Teachers can use the results to help students improve their skills and behaviors in both the classroom and in everyday listening situations. There are five subtests: Main Idea, Details, Reasoning, Vocabulary and Semantics, and Understanding Messages. Students are required to (a) pay careful attention to what they hear, (b) listen with a purpose in mind, and (c) remember what they hear well enough to think about it. Students must also avoid being impulsive in giving answers, and they must express answers verbally. The test can be used to identify students who have specific language impairments, plan interventions, and represent listening comprehension in research studies.

**NEW FEATURES**

Each item on the test was evaluated using both conventional item analysis to choose good items and differential item analyses to find and eliminate potentially biased items. The Total Score was renamed the Listening Comprehension Index. This index is based on a sum of the subtest scaled scores rather than raw scores, and has a mean of 100 and a standard deviation of 15. The index gives equal weight to each of the subtests.

The Listening Comprehension Index has more-than-adequate floors and ceilings for the assessment of the listening comprehension ability of examinees across adolescent ages and ability levels. The test was subjected to diagnostic accuracy analyses, which are particularly rigorous techniques involving the computation of sensitivity, specificity, and the receiver operating characteristic/area under the curve (ROC/AUC) statistics.

**COMPLETE KIT INCLUDES:** Examiner’s Manual and 25 Examiner Record Booklets in a sturdy storage box.

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Receptive-Expressive Emergent Language Test—3rd Edition (REEL-3)

The Receptive-Expressive Emergent Language Test-Third Edition (REEL-3) is designed to help you identify infants and toddlers who have language impairments or who have other disabilities that affect language development. It is especially useful as an assessment and planning instrument in Early Childhood Intervention programs mandated under P.L. 99–457. The REEL-3 has two core subtests, Receptive Language and Expressive Language, and a new supplementary subtest, Inventory of Vocabulary Words. Results are obtained from a caregiver interview.

This edition incorporates a contemporary linguistic model and includes current studies relating to norms, reliability, and validity. Standardization data is based on parent reports describing the behavior of 1,112 infants and toddlers. The normative sample, which reflects 2000 U.S. Census demographics, is stratified by age, gender, race, ethnic group, and geographic region. Standard scores, percentile ranks, and age equivalents are provided.

Test of Language Development—Primary—5th Edition (TOLD-P:5)

The TOLD-P:5 assesses spoken language in young children. It is well constructed, reliable, practical, research-based, and theoretically sound. Professionals can use the TOLD-P:5 to (1) identify children who are significantly below their peers in oral language proficiency, (2) determine their specific strengths and weaknesses in oral language skills, (3) document their progress in remedial programs, and (4) measure oral language in research studies.

The TOLD-P:5 has six core subtests and three supplemental subtests which measure various aspects of oral language are described below. The results of these subtests can be combined to form composite scores for the major dimensions of language: semantics and grammar; listening, organizing, and speaking; and overall language ability.

CORE SUBTESTS: Picture Vocabulary, Relational Vocabulary, Oral Vocabulary, Syntactic Understanding, Sentence Imitation, Morphological Completion.


New studies of the floors, ceilings, and item gradients for the TOLD-P:5 subtests and composites were conducted. The results indicated that the test has consistently excellent ability across all ages and ability levels to not only measure students’ spoken language ability but also detect minor fluctuations in those abilities.

All new Online Scoring and Report System is now included and provides an efficient and easy way to obtain TOLD-P:5 scores and corresponding narrative.


The Test of Language Development-Intermediate, now in its fourth edition, is the best TOLD-I ever — well-constructed, reliable, practical, research-based, and theoretically sound. Professionals can use the TOLD-I to (1) identify children who are significantly below their peers in oral language proficiency, (2) determine their specific strengths and weaknesses in oral language skills, (3) document their progress in remedial programs, and (4) measure oral language in research studies.

The TOLD-I comprises six subtests that measure semantics (i.e., meaning and thought) or grammar (i.e., syntax and morphology) skills: Sentence Combining, Picture Vocabulary, Word Ordering, Relational Vocabulary, Morphological Comprehension, and Multiple Meanings. Two subtests measure listening abilities; two measure organizing abilities; and two measure speaking abilities. The combination of all six subtests represents overall Spoken Language.

This quick, efficient tool converts TOLD-I subtest raw scores into age- and grade-based standard scores, percentile ranks, and age equivalents; generates composite quotients; compares test scores to identify significant intra-individual differences (including up to five non-TOLD-I scores); and provides a printed analytical report of the student’s TOLD-I performance. The software has a word processing interface with complete word processing functionality and provisions for storing examiner and testing information.

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Test of Early Language Development—4th Edition (TELD-4)

The TELD-4 is a highly reliable and valid measure of spoken language in children ages 3 years 0 months through 7 years 11 months. It uses brief, simple tasks to obtain a broad picture of language development, specifically semantics, syntax, and morphology. It is used to identify language delays (compared to age-related peers), to determine language strengths and weaknesses, and to track a child’s progress. Like the previous edition, the test yields Receptive Language and Expressive Language subtest index scores, as well as a Spoken Language index score.

Pictures are in color to make them appealing to children. The test is untimed, and the test kit contains all manipulatives needed.

All users now have access to the new optional PC-, Mac-, Chromebook-, and tablet-compatible TELD-4 Online Scoring and Report System via activation codes that are included in each package of TELD-4 Examiner Record Booklets. This system is a quick, efficient tool for (a) entering test session data; (b) converting subtest item scores or total raw scores into scaled scores; (c) generating composite index scores, percentile ranks, and upper and lower confidence intervals; (d) comparing TELD-4 scores to identify significant intraindividual differences; and (e) obtaining a score summary or narrative report. Use of the software ensures accurate application of basals and ceilings and calculation of scores.


Comprehensive Assessment of Spoken Language—2nd Edition (CASL-2)

The Comprehensive Assessment of Spoken Language—Second Edition is the most up-to-date measure of oral language skills available. It offers the flexibility of 14 stand-alone tests in one comprehensive yet specific battery. Preserving the strengths of the original and highly regarded test, the second edition introduces new and enhanced features to increase validity, functionality, and ease of use.

The CASL-2 can be used by speech–language pathologists and other professionals in a variety of settings, including schools, clinics, hospitals, private practices, and intervention programs. The CASL-2 provides important information for everyone involved in treatment, so you can help children and young adults reach their potential at school, at home, at work, and in the community.

14 stand-alone tests give you the flexibility to measure only the specific area or areas that you are interested in. You can interpret each test separately and/or combine test scores to get a wider picture of oral language skills. The CASL-2 tests feature extended age ranges so you can start assessing and intervening earlier, as well as track progress in the same child over many years using the test. Many of the tests now include younger ages, and all of them extend to age 21.


The Rossetti Infant-Toddler Language Scale

The Rossetti Infant-Toddler Language Scale is designed to provide the clinician with a comprehensive, easy-to-administer, and relevant tool to assess the preverbal and verbal aspects of communication and interaction in the young child.

The Rossetti-Toddler Language Scale is a criterion referenced instrument that assesses Interaction-Attachment, Pragmatics, Gesture, Play, Language Comprehension, and Language Expression.

Behaviors can be directly elicited from the child, directly observed, or reported by parent or caregiver to credit the child’s performance. All carry equal weight when scoring the Scale. Results reflect the child’s mastery of skills in each of the areas assessed at three-month intervals across developmental domains tested.

The test items guide you in directing and structuring observations in order to monitor the child’s progress in language developmental areas. The items are based on a compilation of author observations and descriptions from developmental hierarchies and behaviors recognized and used by leading authorities in the field of infant-toddler assessment. Only items considered discriminating and representative of a skill at an age were included.

Severity rating guidelines help you interpret the results and confidently communicate the severity of the child’s delay.

Parent Questionnaire and report questions are in English and Spanish, found on the CD-ROM for quick printing.

COMPLETE KIT INCLUDES: Manual, Parent Questionnaire in English and Spanish on CD-ROM, 15 Test Forms

Therapro® The Assessment Resource for Professionals

phone 800.257.5376 • fax 800.268.6624
Receptive, Expressive & Social Communication Assessment—Elementary (RESCA-E)

Based on current research and designed for today's child, the RESCA-E was developed to provide essential information to professionals and parents about a child’s receptive, expressive, and social communication language skills. It targets critical areas of language development which are often included in IEPs and treatment plans but are difficult or impossible to objectively measure with existing tests for the elementary-age population.

The RESCA-E combines standardized tests with informal observation across different settings to give a more complete picture of a child's communication skills.

The RESCA-E has 11 components, organized into three cores. The three cores, their component subtests, and associated supplemental subtests are: RECEPTIVE Core (Comprehension of Vocabulary / Comprehension of Oral Directions / Comprehension of Stories and Questions); EXPRESSIVE Core (Expressive Labeling of Vocabulary / Expressive Skills for Describing and Explaining / Narrative Skills); and SOCIAL COMMUNICATION Core (Comprehension of Body Language and Vocal Emotion / Social and Language Inference / Situational Language Use).


Test of Expressive Language (TEXL)

The new Test of Expressive Language (TEXL) is a highly reliable and valid measure of a child's expressive spoken language ability. The test measures a child's ability to produce the following categories of English language forms:

Vocabulary: Word classes such as nouns, verbs, adjectives, and adverbs, and of words that represent basic percepts and concepts.

Grammatical Morphemes: Function words (e.g., prepositions, pronouns, determiners) and inflections (e.g., bound morphemes such as noun number and case, verb number and tense, noun–verb agreement, and derivational suffixes).

Elaborated Phrases and Sentences: Syntactically based word relations and elaborated phrase and sentence constructions, including the modalities of simple and combined constructions (interrogative sentences, negative sentences, active and passive voice, direct and indirect object), embedded sentences, and partially and completely conjoined sentences.

Each item is composed of a word or sentence and a corresponding picture plate. The examiner reads the stimulus aloud and the subject answers a question, finishes a sentence, or combines sentences based on the stimulus provided. The TEXL test items appear according to difficulty within each of the three subtests.

The Examiner’s Manual includes a comprehensive discussion of the test's theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norms tables, and guidelines for using the test’s results.


Evaluating Acquired Skills in Communication—3rd Edition (EASIC-3)

Evaluating Acquired Skills in Communication—Third Edition (EASIC-3) is a five-level inventory developed for use with children who are developmentally disabled, have autism, or have moderate to severe cognitive and language disorders. It provides assessment items in the areas of prelinguistic skills, semantics, syntax, morphometry, and pragmatics.

Examiners can use this systematic tool to (1) evaluate students’ communication skills, (2) record their performance, or (3) translate assessment data into appropriate goals and objectives for IEPs.

Some new features of EASIC-3: New assessment items are included; Developmental age ranges have been updated; Profiles have been restructured to correspond to revised Inventory items; Developmental Age Charts (Appendix A) correspond to the revised developmental data; and Goals and Objectives List (Appendix B) correspond to the new item hierarchy on the Inventories and Profiles.

NOTE: The examiner will need to gather a variety of common objects and toys to use in the administration of EASIC-3.

COMPLETE KIT INCLUDES: Manual, Picture Book, a set of Picture Cards, 10 Prelanguage Inventory Booklets, 10 Receptive I & II Inventory Booklets, 10 Expressive I & II Inventory Booklets, 10 Prelanguage Profile Forms, 10 Receptive I & II Profile Forms, 10 Expressive I & II Profile Forms, a Developmental Age Charts (Appendix A), and a Goals and Objectives List (Appendix B), all in a sturdy storage box.
Illinois Test of Psycholinguistic Abilities—3rd Edition (ITPA-3)

The ITPA-3 is an effective measure of children's spoken and written language. All of the subtests measure some aspect of language, including oral language, writing, reading, and spelling. The content in this edition is consistent with Charles Osgood's original communication model and also with the adaptations of that model made by Samuel Kirk, James McCarthy, and Winifred Kirk.

The new ITPA-3 Software Scoring and Report System, Version 1.1, is a quick, efficient tool to (a) convert ITPA-3 subtest raw scores into standard scores, percentile ranks, and age equivalents; (b) generate composite quotients; (c) compare ITPA-3 subtest performance and composite performance to identify significant intra-individual differences; and (d) provide a printed report of the student's ITPA-3 performance, including composite pattern analysis.


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<tr>
<td>EVA526213</td>
<td>ITPA-3 Student Response Booklet (25)</td>
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Test of Narrative Language—2nd Edition (TNL-2)

The Test of Narrative Language—Second Edition (TNL-2) is a norm-referenced test that measures children's narrative language abilities (i.e., children's ability to understand and tell stories). Narration is an important aspect of spoken language, not usually measured by oral-language tests, that provides a critical foundation for literacy.

The TNL-2 enables clinicians to assess important aspects of narrative language without having to transcribe children's stories. This saves hours of transcription time, and provides a valid and reliable metric of narrative language development. The TNL-2 is a natural complement to other standardized tests that use contrived formats to assess components of oral language, and it is especially useful for diagnosing language-based learning disabilities.


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<td>EVA52689</td>
<td>TNL-2 Picture Book</td>
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Token Test for Children—2nd Edition (TTFC-2)

The Token Test for Children—Second Edition (TTFC-2) is a reliable and effective screening measure for assessing receptive language in children ages 3 years 0 months to 12 years 11 months. Administration is rapid, yielding raw scores, standard scores, percentile ranks, and age equivalents. The normed representative sample consists of 1,310 children, residing in 22 states.

TTFC-2 comes with 20 small tokens, varying in size (large and small), shape (round and square), and color (blue, green, yellow, white, and red). The child is given three opportunities to practice. The administrator then gives the child 16 linguistic commands, to which they must respond by manipulating the tokens. The commands are arranged in four parts of increasing difficulty, and must be administered in consecutive order.

The TTFC-2 is psychometrically sound, accurate, and cost-efficient. It can be used for language intervention progress monitoring.

COMPLETE KIT INCLUDES: Examiner's Manual, 50 Examiner Record Forms, and a Tokens Kit, all in a sturdy storage box.

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<td>EVA526118</td>
<td>TTFC-2 Examiner Record Forms (50)</td>
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Test of Adolescent and Adult Language—4th Edition (TOAL-4)

The updated TOAL-4 assesses spoken and written language in the ways adolescents and young adults actually use those skills. This new edition, with six subtests instead of eight, takes less time than previous editions and was normed on a nationally representative sample. Examinees provide oral responses for Word Opposites, Word Derivations, and Orthographic Usage (punctuation).

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The Listening Comprehension Test 2

**Purpose:** Assesses listening through natural classroom situations rather than evaluating through simple repetition or discrimination subtests

**Ages:** 6 to 11 years

**Admin Time:** 35 minutes

**Authors:** Linda Bowers, MA, SLP; Rosemary Huisingh, MA, SLP; Carolyn LoGiudice, MA, CCC-SLP

Because children need the basic skill of listening (receiving, attending to, interpreting, and responding to verbal messages and other cues) in order to succeed in school and in life and because classroom listening is such an integrated process, each subtest on The Listening Comprehension Test 2 require students to: pay attention; listen with a purpose in mind; remember what they hear well enough to think about it; avoid being impulsive in giving answers; express answers verbally.

The test, as closely as possible, models the type of listening required in the classroom. The student must determine what part of the message needs immediate attention, organize and understand the input, and then formulate an expressive response. The test includes 25 items assessing listening abilities in seven areas: Reading, Writing, and Using Numbers; Social Interactions; Contextual Communication; Nonverbal Communication; Sequential Relationships; Humor, Metaphor, and Absurdity; and Internet Basics.

New Features include: Stimulus book illustrations have been replaced with photos, allowing for a greater sense of realism; Administration instructions have been added to the Examiner Record Booklet to increase examiners' ease of use; Items pertaining to the basic use of technology including mobile phones, the Internet, and email, have been added; An all-new standardization sample (2014–2016) was collected.

The Examiner's Manual includes a comprehensive discussion of the test's theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norms tables, and guidelines for using and interpreting the results.


**EVA526143** Complete CADL-3 Kit ................................................................. $248.00

**EVA526144** CADL-3 Examiner's Manual ......................................................... $69.00

**EVA526145** CADL-3 Picture Book ...................................................................... $97.00

**EVA526146** CADL-3 Patient Response Forms (25) ........................................... $33.00

**EVA526147** CADL-3 Examiner Record Booklets (25) ....................................... $49.00

**Functional Communication Profile-Revised (FCP-R): Assessing Communicative Effectiveness in Clients with Developmental Delays**

**Purpose:** Lets you account for some of the unique aspects of communication and the diversity among individuals with developmental and acquired delays

**Ages:** 3 years to Adult

**Admin Time:** 45 to 90 mins

**Authors:** Larry I. Kleiman


Individual responses subjectively rated based on test items; based on assessment results, general guidelines are given for estimating severity level.

**COMPLETE SET INCLUDES:** Examiner’s Manual and 15 Profile Forms

**EVA520573** FCP-R Test Set ........................................................................... $74.00

**EVA520574** FCP-R Forms (15) ........................................................................ $35.00

**Language Processing Test 3—Elementary (LPT 3)**

This test evaluates the ability to attach increasingly more meaning to information received to then formulate an expressive response. The skills evaluated are discrete and carefully controlled, beginning with simple tasks and progressively increasing the language processing demand placed upon the student. This hierarchical approach ensures evaluation of prerequisite skills for increasing demand. There are two pretest and six subtests. Each subsequent subtest builds on the skills previously evaluated. The test items are valid clinical indicators of the ability to attach meaning to language.

The LPT 3 Elementary is both a valid and reliable measure. Reliability tests (SEM, Inter-Rater Reliability, Test-Retest, KR 20) were highly satisfactory for the total test at all age levels. Contrast value comparisons show the test has a satisfactory ability to differentiate subjects with language disorders from subjects developing language normally. Combined sub-test intercorrelations reveal acceptable levels across all age levels, indicating acceptable validity. Analysis of the LPT 3 Elementary shows no significant difference when comparing race and other minimal differences to socioeconomic status.

**COMPLETE SET INCLUDES:** Examiner’s Manual, 20 Test Forms

**EVA520575** LPT 2 Test Set ............................................................................ $178.00

**EVA520576** LPT 2 Test Forms (20) ................................................................. $45.00

**EVA526583** LPT 3 Test Set ............................................................................ $168.00

**EVA526584** LPT 3 Test Forms (20) ................................................................. $45.00

For a more detailed description of these evaluations, please visit our website: www.therapro.com
The Test of Adolescent/Adult Word Finding—Second Edition (TAWF-2)

The Test of Adolescent/Adult Word Finding—Second Edition is a norm-referenced, single-word expressive language test expressly designed to assess the word-finding ability of adolescents and adults. It can be used to identify individuals who have word-finding problems, plan word finding intervention, and measure word finding ability in research studies.

Features of the TAWF-2: All normative data were collected in 2009-2013; New noun and verb target words have been added; Contains both the 80-item Complete Test and the 28-item Brief Test for use with examinees or in situations where the Complete Test is not feasible; Studies showing the absence of racial and gender bias are reported; Information pertaining to the TAWF-2’s diagnostic accuracy (sensitivity, specificity, and ROC/AUC) is provided; The lexical processing model underlying TWF-2 has been updated to reflect current thinking regarding word retrieval; The Comprehension Check functions as a built-in assessment of examinees’ word knowledge.

The standardized assessment has four naming sections, the results of which are combined to form the overall Word Finding Index: Picture Naming: Nouns, Sentence Completion Naming, Picture Naming: Verbs, and Picture Naming: Categories.

Five informal analyses are also provided. Three of these analyses (the Phonemic Cueing Procedure, the Imitation Procedure, and the Substitution Analysis) examine types of word finding errors individuals make. The remaining informal analyses (the Delayed Response Procedure and the Secondary Characteristics Tally) contribute to interpreting the Word Finding Index.


EVA52645 Complete TAWF-2 Kit .................................................. $405.00
EVA52646 TAWF-2 Comprehension Check Picture Book ............... $121.00
EVA52647 TAWF-2 Examiner Record Booklets (25) ..................... $62.00
EVA52648 TAWF-2 Examiner’s Manual .................................. $84.00

Test of Word Finding—Third Edition (TWF-3)

The Test of Word Finding, now in its third edition, is a norm-referenced, single-word expressive language test expressly designed to assess children’s word-finding ability. It can be used to identify students who have word-finding problems, plan word finding intervention, and measure word finding ability in research studies.

The standardized assessment has four naming sections, the results of which are combined to form the overall Word Finding Index: Picture Naming: Nouns, Sentence Completion Naming, Picture Naming: Verbs, and Picture Naming: Categories.

Correlations of the Word Finding Index with those of other well-known expressive language tests are large or very large in magnitude. Diagnostic accuracy studies indicate that the TWF-3 is able to accurately identify students with word finding difficulties.

Five informal analyses are also provided. Three of these analyses (the Phonemic Cueing Procedure, the Imitation Procedure, and the Substitution Analysis) examine types of word finding errors students make. The remaining informal analyses (the Delayed Response Procedure and the Secondary Characteristics Tally) contribute to interpreting the Word Finding Index.

COMPLETE KIT INCLUDES: Examiner’s Manual, Word Finding Assessment Picture Book, Comprehension Check Picture Book, 10 Preprimary Examiner Record Forms, 10 Primary Examiner Record Forms, and 10 Intermediate Examiner Record Forms, all in a sturdy storage box.

EVA526432 Complete TWF-3 Test .................................................. $495.00
EVA526434 TWF-3 Examiner’s Manual .................................. $107.00
EVA526435 TWF-3 Intermediate Examiner Record Booklets (10) .................. $29.00
EVA526437 TWF-3 Preprimary Examiner Record Booklets (10) ............... $29.00
EVA526436 TWF-3 Primary Examiner Record Booklets (10) .................. $29.00
EVA526438 TWF-3 Comprehension Check Picture Book ............... $153.00

The WORD Test 3—Elementary

The WORD Test 3 - Elementary assesses a student’s ability to recognize and express semantic attributes critical to vocabulary growth and language competency. Current research clearly supports the impact each task on this test has on academic and reading competency. You will understand how your students attach meaning to words and why they might be struggling in the classroom.

The six subtests of The WORD Test 3 - Elementary measure skills that correlate with word mastery, reading comprehension, and overall academic success. Test items are from the curriculum, including language arts, social studies, math, health, and science. There are fifteen tasks in each subtest.

The Subtests are: Assocations: Choose one semantically-unrelated word from among four and explain the choice in relation to the common category of the other three words; Synonyms: Give a one-word synonym for each stimulus word; Semantic Absurdities: Identify and repair an absurd statement; Antonyms: Give a one-word opposite for each stimulus word; Definitions: State the definition of words that include critical attributes; and Flexible Word Use: Give multiple meanings for words.

The Discussion of Performance section in the Examiner’s Manual guides the examiner to make appropriate and educationally-relevant recommendations for intervention based on a clear understanding of each task. There are examples of how weaknesses are exhibited in the classroom and instructional suggestions to assist with intervention planning based on current research and best-practice strategies.

COMPLETE KIT INCLUDES: Examiner’s Manual and 20 Test Forms.

EVA526013 Complete WORD Test 3 Kit ........................................ $168.00
EVA526014 WORD Test 3 Test Forms (20) ................................. $45.00
Test of Semantic Skills—Primary (TOSS-P)

The TOSS-P is a receptive and expressive diagnostic test designed to assess a student’s semantic skills and it yields specific information about a student’s semantic and vocabulary abilities.

Children with language and learning disorders often are severely hampered when facing words out of context or new words in reading passages, or when trying to determine word meaning by using context clues. The TOSS-P meets the need for a comprehensive diagnostic test of semantics. A wide range of receptive and expressive tasks, including skills in categorizing, describing, and defining (not just naming skills), means the TOSS-P will accurately assess your students’ competency with semantics.

The test is built around six common themes and comprised of twenty realistic line-illustrations depicting natural, real-life scenes. In this way, your student can use visual and verbal information to respond to the test as they do to respond to their environment.

Purpose: Designed to assess a student’s semantic skills
Ages: 4-8 through 8-11
Admin Time: 25-30 minutes
Authors: Linda Bowers, Rosemary Huisingh, Carolyn LoGiudice & Jane Orman

Test of Semantic Reasoning (TOSR)

The Test of Semantic Reasoning (TOSR) is a new, standardized vocabulary assessment for children and adolescents ages 7 through 17. Semantic reasoning is the process by which new words are learned and retrieved from one’s lexicon through analysis of multiple images that convey various contexts of the word’s meaning.

The TOSR assesses breadth (the number of lexical entries one has) and depth (the extent of semantic representation for each known word) of vocabulary knowledge without taxing expressive language skills, providing an important new resource for individuals assessing children with possible language and literacy deficits. Breadth and depth are both important for literacy. Breadth is related to early decoding, and depth to later comprehension.

The TOSR was developed by two practicing speech-language pathologists. It includes 90 sets of four high-quality color photographs that reflect a vocabulary word in a variety of contexts. The individual must use semantic reasoning to analyze the pictures and then select the single word from a choice of four that best represents the multiple contexts of the word represented by all the images.

Information obtained from this assessment can provide educators, psychologists, and speech-language pathologists with information on children and adolescents’ basic receptive vocabulary knowledge, as well as their higher order thinking and reasoning in the semantic domain.

The TOSR incorporates the easy administration and scoring of traditional one-word vocabulary assessments. Age-related starting points and ceilings ensure that only a subset of items will need to be administered. Scoring is straightforward, generally taking less than 5 minutes.

Purpose: Assesses breadth and depth of vocabulary knowledge
Ages: 7 through 17
Admin Time: 45-60 minutes
Authors: Beth Lawrence, MA, CCC-SLP & Deena Seifert, MS, CCC-SLP

Comprehensive Receptive and Expressive Vocabulary Test—3rd Edition (CREVT-3)

The CREVT-3 is an innovative, efficient measure of both receptive and expressive oral vocabulary. It is a norm-referenced assessment tool used to identify, describe, and quantify oral vocabulary proficiency in children and adults.

The format of the 76-item Receptive Vocabulary subtest is a variation of the familiar “point-to-the-picture-of-the-word-I-say” technique featuring the unique use of thematic full-color photographs. This subtest is made up of 10 plates, each of which comprises six pictures. All of the pictures on a plate relate to a particular theme. After each word, the examinee selects from six photographs the one that best goes with the stimulus word.

The Expressive Vocabulary subtest uses the “define-the-word-I-say” format—the most popular and precise way to measure expressive vocabulary. The format encourages and requires the individual to converse in detail about a particular stimulus word, making it ideal for measuring expressive ability. The 29 items on this subtest pertain to the same 10 common themes used in the receptive subtest.

Purpose: Innovative, efficient measure of both receptive and expressive oral vocabulary
Ages: 5 to 89 years
Admin Time: 20-30 minutes
Authors: Gerald Wallace & Donald D. Hammill

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Test of Preschool Vocabulary (TOPV)

The Test of Preschool Vocabulary (TOPV) is an easy-to-administer test that appeals to preschoolers and encourages children to share the words they know. The test measures children’s ability to receive and express single words that represent all parts of speech and a variety of basic concepts (things, events, experiences, temporality, relational and substantive processes, and relative position). The words tested progress in order of difficulty from familiar words and concepts to less familiar ones.

The TOPV has two subtests, Expressive Vocabulary and Receptive Vocabulary, the results of which are combined to create a composite, the General Vocabulary Index. Test results can be used to (a) identify children with oral language disorders, (b) diagnose early semantic ability, (c) compare receptive and expressive vocabulary knowledge, (d) monitor language intervention progress, and (e) do research.

The TOPV was normed on a 29 state nationally representative sample of 1,990 children, ages 2-0 through 5-11. It yields percentile ranks, scaled scores, age equivalents, and an index score. TOPV has strong internal consistency and test-retest reliability (coefficients ranging from .82 to .97). It correlates highly (.73 Very Large) with popular criterion measures of spoken vocabulary. Studies of diagnostic accuracy relating to the test’s sensitivity (.73), specificity (.79), classification accuracy (.76), and receiver operating characteristic/area under the curve (ROG/AUC, .82) are reported.

COMPLETE KIT INCLUDES: Examiner’s Manual, 25 Examiner Record Booklets, Picture Plate (two scenes), Garage, and an Object Kit, all in a sturdy storage box.


Now features norms through geriatric ages (80+). The EOWPVT-4 is an individually administered, norm referenced assessment of how well persons ages 2 years, 0 months to over 80 years can name (in English) the objects, actions, or concepts presented in full-color pictures. The EOWPVT-4 features additional items of younger children, as well as items applicable to older adults.

Color pictures are presented singly to the examinee, who is asked to name what is shown. The EOWPVT-4 retains the use of prompts and cues (shown on the Record Form) to ensure that examinees will attend to the relevant aspect of each illustration. Afe related starting points and ceilings (reached when the examinee makes a set number of consecutive errors) ensure that only a subset of items (the critical range is administered.

The EOWPVT-4 is untimed and can be administered in about 20 minutes. Scoring is easy and straightforward, generally taking less than 5 minutes. Raw scores are reported as standard scores, percentile ranks and (if necessary) age equivalents.

Norms are based on a large, nationally representative sample. Because the test was co-normed with the Receptive One-Word Picture Vocabulary Test, Fourth Edition, you can make meaningful comparisons between expressive and receptive language when you administer both tests. The Record Form provides a convenient score summary/graph that simplifies score comparison.

In addition to assessing verbal intelligence, this instrument is useful in screening for preschool and kindergarten readiness and in estimating the English fluency of bilingual individuals.

COMPLETE KIT INCLUDES: Manual, Test Plates, Record Forms (in English, 25 pack), in portfolio.


This edition is intended for use with—and was normed on—a bilingual population of individuals who speak Spanish and English with varying levels of proficiency. Because examinees are permitted to respond in either language, the test measures total acquired vocabulary. The Spanish-bilingual edition (SBE) tests are co-normed, allowing for a comprehensive evaluation of a person’s naming abilities.

The Expressive One-Word Picture Vocabulary Test—4: Spanish-Bilingual Edition can be administered in either Spanish or English or both languages, and the individual is given the opportunity to respond in either language. As with the EOWPVT-4 (English version), the EOWPVT-4: SBE retains the use of prompts and cues (shown on the Record Form) to ensure that examinees will attend to relevant aspects of each illustration. Age-related starting points and ceilings (reached when the examinee makes a set number of consecutive errors) ensure that only a subset of items is administered, allowing testing to usually be completed in 20 to 25 minutes.

Scoring is easy and straightforward, and generally takes about 5 minutes. Raw scores are reported as standard scores, percentile ranks, and (if necessary) age equivalents.

Examiners must be fluent in both languages or be assisted by someone fluent in the language not spoken by the principal examiner, in order to understand whether any dialectical variants should be counted as correct.


The ROWPVT-4 is an individually administered, norm-referenced assessment of how well persons age 2 years 0 months to over 80 years can match a word that is heard (in English) to objects, actions, or concepts presented in full-color pictures (in a multiple-choice format). The ROWPVT-4 features additional items for younger children as well as for older adults.

The examinee indicates (by pointing or saying) the correct color picture (out of four presented) that matches the word spoken by the examiner. Age-related starting points and ceilings (reached when the examinee makes a set number of consecutive errors) ensure that only a subset of items (the critical range) is administered.

The ROWPVT-4 is untimed and can be administered in about 20 minutes. Scoring is easy and straightforward, generally taking less than 5 minutes. Raw scores are reported as standard scores, percentile ranks, and (if necessary) age equivalents.


This edition is intended for use with—and was normed on—a bilingual population of individuals who speak Spanish and English with varying levels of proficiency. Because examinees are permitted to respond in either language, the test measures total acquired vocabulary; it is not a test of language proficiency. The Spanish-bilingual edition (SBE) tests are concerned, allowing for a comprehensive evaluation of a person’s naming abilities.

The Receptive One-Word Picture Vocabulary Test-4: Spanish-Bilingual Edition can be administered in either Spanish or English or both languages, and the individual is given the opportunity to respond in either language. Examiner singly presents 180 color plates to the examinee, who is shown four images and asked to match a word that is heard to the object, action, or concept presented. As with the ROWPVT-4 (English version), the ROWPVT-4: SBE retains the use of prompts and cues (shown on the Record Form) to ensure that examinees will attend to relevant aspects of each illustration.

Clinical Assessment of Articulation and Phonology—2nd Edition (CAAP-2)

The CAAP-2 assesses articulation and phonology in children. It is time-efficient, accurate, and yields results that are easy to score and interpret. The checklist approach to assessing phonological processes virtually eliminates the need for phonetic transcription. The CAAP-2 is designed so that children will enjoy its administration. It helps you qualify students for therapy with word standard scores, sentence standard scores, and phonology standard scores.

The articulation inventory targets pre- and postvocalic consonant singletons; cluster words containing S, R, and L in the initial position; three- and four-syllable words; postvocalic productions of R; and the production of sounds in sentences (for children 5 years and older). The phonological process checklists assess final consonant deletion, cluster reduction, syllable reduction, gliding, vocalization, deaffrication, stopping, prevocalic voicing, and postvocalic devoicing.

Qualify students for therapy with: Word standard scores, Sentence standard scores, Phonology standard scores.

Articulation inventory targets: Pre- and postvocalic consonant singletons, Cluster words containing S, R, and L in the initial position, Three- and four-syllable words, Postvocalic productions of R, The production of sounds in sentences (for children 5 years and older)

Phonological process checklists assess: Final consonant deletion, Cluster reduction, Syllable reduction, Gliding, Vocalization, Fronting (velar and palatal), Deaffrication, Stopping, Prevocalic voicing Postvocalic devoicing


For a more detailed description of these evaluations, please visit our website: www.therapro.com
Rapid Automated Naming and Rapid Alternating Stimulus Tests (RAN/RAS)

The RAN and RAS Tests are considered to be the "gold standard" of naming tests. These tests reflect three decades of clinical evidence and research across all parts of the United States, Canada, Europe, Israel, Asia, and Australia that have examined the relation between processing speed and reading. This wealth of research evidence added to the fact that the tests are simple, fun, and quick to administer (i.e., five to ten minutes for all six tests) make these an important addition to any prediction battery or diagnostic assessment of oral and written language from age five to adulthood.

Phonological Awareness Test-2: Normative Update (PAT-2: NU)

The PAT-2:NU is a standardized assessment of phonological awareness, phoneme-grapheme correspondence, and phonemic decoding skills. The test has six core subtests (Rhyming, Segmentation, Isolation, Deletion, Substitution, and Blending) that measure students' knowledge of spoken syllables and phonemes in students ages five through nine years of age. The test also has two supplemental subtests (Phoneme-Grapheme Correspondence and Phonemic Decoding) that measure students' knowledge of sound/symbol correspondence in isolation and in practice in students ages six through nine years.

The test is comprehensive and includes a wide variety of tasks; performance on each of these tasks has been correlated with success in early reading and spelling. The straightforward, developmental format lets you easily tease out specific skills and plan effective interventions.


Detekto: An assessment tool to identify speech difficulties in Spanish speaking children

DETEKTO is an easy to use assessment tool that gives you many possibilities, using attractive and colorful images specially designed for children:

- Obtain information about the form and function of the articulators
- Repetition of the phonemes to determine if the child produces them in any context
- Production of phonemes in single words, which covers 5 vowels, 17 consonants, 30 blends and 6 diphthongs
- Application Format
- Interpretation Format
- Production of phonemes in context, making this a unique tool that helps to determine if the child has more or different errors in conversation than in single word


Auditory Phoneme Sequencing Test (APST)

The APST uses a picture-response method avoiding the need for articulation. Twenty items presented on the CD-ROM include two-word, three-word, four-word, and five-word stimuli. The administrator asks the child to point to the pictures in the order they were presented. All words are monosyllabic and are common for children ages 5 through 9 years old. The test is untimed but takes 10 to 12 minutes to complete. Then, convert the overall raw score to a standard score, percentile, and age equivalent.

COMPLETE KIT INCLUDES: Manual, Test Plates, Record Forms (25 pack), and Administration CD

The test is comprehensive and includes a wide variety of tasks; performance on each of these tasks has been correlated with success in early reading and spelling. The straightforward, developmental format lets you easily tease out specific skills and plan effective interventions.

Hodson Assessment of Phonological Patterns—3rd Edition (HAPP-3)

The Arizona Articulation and Phonology Scale, Fourth Revision measures speech intelligibility, articulatory impairment, and phonological impairment in one quick, easy to use assessment. The fourth revision of this widely used assessment retains the strengths of its predecessors and adds features that enhance its effectiveness in identifying individuals who have speech sound disorders. New norms, refined measurement properties, and the addition of connected-speech and phonology tests help clinicians identify individuals who may benefit from speech sound services. Supplemental qualitative tasks facilitate deeper interpretation of the scores and help clinicians develop treatment plans that are targeted to the individual's needs.


Glaspey Dynamic Assessment of Phonology (GDAP)

The GDAP is the first standardized, computer-assisted, dynamic assessment of speech production and stimulability. This ground-breaking approach employs a unique 15-point cueing system and hierarchy (from 15 to 1) which represents the scaffolding levels available to a child in the production of a target. This responsive approach provides for a more sensitive measure that takes into account the emergence of skills and the child's ability to learn, not just the final speech product.

A standardized decision matrix is used to determine the progression of prompts and cues, and the speech environment complexity. A low score of “1” is best and indicates that the child produces the target sound independently (i.e. with no instructions or verbal cues) in connected speech. In contrast, a high score indicates that many support strategies were needed by the child for production of a single sound in isolation. By assessing a child's responsiveness in greater detail with the GDAP, it is possible to measure how a child responds to cues across a range of systematically varied linguistic contexts.

COMPLETE KIT INCLUDES: Manual, Plates and 25 Record Forms.

Comprehensive Test of Phonological Processing—2nd Edition (CTOPP-2)

The Comprehensive Test of Phonological Processing (CTOPP) is popular with professionals in psychology and education for its ability to meet the need for an assessment of reading-related phonological processing skills. It has been used in many studies of reading and phonological processing in both typical and clinical populations.

The floor effects present in the 5- and 6-year-old version of the first edition have been eliminated by the addition of easier items and the ceilings were extended by the addition of more difficult items. The results of the item additions were so successful that it now is appropriate to administer the CTOPP-2 to 4-year-olds. The lower version of the CTOPP-2 now covers the 4- to 6-year-old range. A new phonological awareness subtest called Phoneme Isolation was added.

The CTOPP-2 has four principal uses: (1) to identify individuals who are significantly below their peers in important phonological abilities, (2) to determine strengths and weaknesses among developed phonological processes, (3) to document individuals' progress in phonological processing as a consequence of special intervention programs, and (4) to serve as a measurement device in research studies investigating phonological processing.

COMPLETE KIT INCLUDES: Examiner's Manual, 25 Examiner Record Booklets for ages 4 through 6, 25 Examiner Record Booklets for ages 7 through 24, Picture Book, and 2 CDs, all in a sturdy storage box.

For a more detailed description of these evaluations, please visit our website: www.therapro.com
LinguiSystems Articulation Test—Normative Update (LAT-NU)

The LinguiSystems Articulation Test—Normative Update (LAT-NU) was designed to identify children and young adults with abnormal articulation patterns. It ensures a thorough examination of all sounds and blends by presenting several sounds more than one time in the same position. All positions at the word level are tested.

The test allows examiners to rate the severity of the speech-sound disorder, rate the intelligibility of speech, and evaluate stimulability. The test also allows examiners to screen for childhood apraxia of speech (CAS), a neurological disorder that impairs the precision and consistency of speech.

The LAT-NU can be used to screen for CAS through the evaluation of the individual’s sequential productions of twelve multisyllabic words. Intelligibility and stimulability can also be assessed. Intelligibility of speech is rated by noting the type and frequency of errors in a picture description task. Stimulability is assessed immediately after an incorrect production is made, and determines if the individual is able to imitate a correct production.

Photo Articulation Test—3rd Edition (PAT-3)

The Photo Articulation Test—Third Edition (PAT-3) is a completely revised edition of the popular Photo Articulation Test. It meets the nationally recognized need for a standardized way to document the presence of articulation errors. The PAT-3 enables the clinician to rapidly and accurately assess and interpret articulation errors.

The test consists of 72 color photographs (9 photos on each of eight sheets). The first 69 photos test consonants and all but one vowel and one diphthong. The remaining 3 pictures test connected speech and the remaining vowel and diphthong. A deck of the same 72 color photographs, each on a separate card, is provided for further diagnosis and may be used in speech-language remediation.

To administer the PAT-3, the examiner simply points to each consecutively numbered photograph and asks the child, “What is this?” The child’s response is scored on the Summary/Response Form to indicate the presence or absence of errors. The elicited sounds are arranged by age of acquisition. All sounds that are tested are written in the international phonetic alphabet. In addition, consonant sounds are differentiated into the initial, medial, and final positions within the stimulus words. The results from the PAT-3 provide the clinician with a straightforward comprehensive view of each student’s articulation errors.

The PAT-3 was standardized in a 23-state sample of more than 800 public and private school students in prekindergarten through Grade 4. Percentiles, standard scores, and age equivalents are provided.

Arizona Articulation and Phonology Scale, Fourth Revision (Arizona-4)

The Arizona Articulation and Phonology Scale, Fourth Revision measures speech intelligibility, articulatory impairment, and phonological impairment in one quick, easy to use assessment. The fourth revision of this widely used assessment retains the strengths of its predecessors and adds features that enhance its effectiveness in identifying individuals who have speech sound disorders. New norms, refined measurement properties, and the addition of connected-speech and phonology tests help clinicians identify individuals who may benefit from speech sound services. Supplemental qualitative tasks facilitate deeper interpretation of the scores and help clinicians develop treatment plans that are targeted to the individual’s needs.

The Arizona-4 scores help clinicians identify individuals who are in need of speech sound services and develop treatment plans for them. The primary score is the easy-to-understand Word or Sentence Articulation Total Score, which has a direct and useful interpretation. Because the Total Scores are based on research that links them to the actual rate of speech sound occurrence in American speech, they express a real sense of how often misarticulated sounds are likely to occur in the examinee’s everyday speech and what impact those misarticulations are likely to have on overall speech intelligibility. The Word–Sentence Articulation Critical Difference Score provides further information about clinically meaningful differences between articulation in single-word versus connected-speech contexts.

Arizona-4 scores help clinicians identify individuals who are in need of speech sound services and develop treatment plans for them. The primary score is the easy-to-understand Word or Sentence Articulation Total Score, which has a direct and useful interpretation. Because the Total Scores are based on research that links them to the actual rate of speech sound occurrence in American speech, they express a real sense of how often misarticulated sounds are likely to occur in the examinee’s everyday speech and what impact those misarticulations are likely to have on overall speech intelligibility. The Word–Sentence Articulation Critical Difference Score provides further information about clinically meaningful differences between articulation in single-word versus connected-speech contexts.

The Examiner Record Booklet also provides a two-page summary allowing examiners to visually analyze the individual’s speech errors by word location, type, and stimulability. The Speech Sound Error Analysis section All phonemes tested in the LAT-NU are included in the.

The Examiner’s Manual discusses the test’s theoretical and research-based foundation, item development, standardization, administration and scoring procedures, normative tables, and guidelines for using the test’s results. Reliability and validity studies conducted include typically developing students and students previously been diagnosed with an articulation disorder.


Arizona-4 Complete Print Kit

EVA551115 Arizona-4 Complete Print Kit ........................................ $289.00
EVA551116 Arizona-4 Word & Sentence Articulation Record Form (25) ........................................ $42.00
EVA551117 Arizona-4 Phonology Coding Form (25) ........................................ $42.00
EVA551118 Arizona-4 Print Easel ........................................ $147.00
EVA551119 Arizona-4 Manual ........................................ $104.00
Test of Pragmatic Language—2nd Edition (TOPL-2)

The Test of Pragmatic Language-2 (TOPL-2) expands the original test for an even more in-depth and comprehensive analysis of social communication in context. Its four principal uses include: identifying individuals with pragmatic language deficits; determining individual strengths and weaknesses; documenting an individual’s progress; and researching pragmatic language skills.

This updated edition addresses reviewers’ concerns with the previous edition, adding and improving on important components such as Pragmatic Evaluation, Detailed IEP’s, Clinical Interpretive Framework, Extended Norms, Color Picture Prompts, Verbal Prompts, and Comprehensive Scoring Guideline.

This test was originally designed for use by speech-language pathologists. However, with the ever-increasing emphasis on social skills and conflict resolution in students, the TOPL-2 test provides essential information for all team members: school psychologists, counselors, clinical psychologists, and special education specialists.


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Social Language Development Test - Elementary: Normative Update (SLDT-E: NU)

The Social Language Development Test-Elementary: Normative Update (SLDT-E:NU) assesses language-based skills of social interpretation with friends, the skills found to be most predictive of social language development. Specifically, it measures the language required to appropriately infer and express what another person is thinking or feeling within a social context, to make multiple interpretations, take mutual perspectives, and negotiate with and support their peers. These tasks reflect the developmental refinement of social language comprehension and expression and differentiate typically developing children with those with autism spectrum disorder.

New Features include: Updated norms based on the 2015 U.S. Census; New standard score metric for subtests and composites; All new item analysis and item bias studies; All new reliability and validity studies, including diagnostic accuracy analyses, which are considered the most rigorous techniques for establishing validity today. These analyses involve the computation of sensitivity and specificity indexes and the receiving operating characteristic/area under curve statistic (ROC/AUC).


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<td>EVA520585</td>
<td>SLDT-E:NU Scoring Standards and Example</td>
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Social Language Development Test - Adolescent: Normative Update (SLDT-A: NU)


New Features include: updated norms to reflect the demographics of the 2016 U.S. Census; the normative sample is stratified by age relative to geographic region, gender, race, and ethnicity; New standard score metric for subtests and composites; all-new item analysis and item bias studies provide convincing evidence of content-description validity; All-new reliability and validity studies were prepared, including diagnostic accuracy analyses, which are considered the most rigorous techniques for establishing validity today. These analyses involve the computation of sensitivity and specificity indexes and the receiving operating characteristic/area under curve statistic (ROC/AUC). The audio files for the Interpreting Ironic Statements subtest are available for use or download online.

The test has four subtests, which require students to make inferences, interpret photographed scenes, and explain how they would resolve problems with peers. The Examiner’s Manual includes a comprehensive discussion of the test’s theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norms tables, and guidelines for using and interpreting the test’s results.


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<td>EVA520590</td>
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For a more detailed description of these evaluations, please visit our website: www.therapro.com
The Listening Inventory

The Listening Inventory is an informal behavioral observation completed by parents and/or teachers. The Listening Inventory is a first step to quantify behaviors to see if a child might need evaluation for auditory disorders and it can provide a starting point for discussions with the speech-language professional prior to formal evaluation of a child. Six areas are assessed and index scores are derived for each. The areas are: linguistic organization, decoding/language mechanics, attention/organization, sensory/motor, social/behavioral and auditory processes.

The Listening Inventory Form is easy to use, designed to automatically direct scores to the appropriate Index column for quick scoring. The manual contains background information as well as a guide for interpretation and use of the observations that were made. Profile forms are provided to assist with score interpretation using convenient graphs.

Auditory Processing Abilities Test (APAT)

The APAT is a nationally standardized, norm-referenced auditory processing battery. It may be used in the identification of children who are at risk or who may experiencing Auditory Processing Disorder (APD). The APAT was developed using a model based on a hierarchy of auditory processing skills that are basic to listening and processing spoken language. These skills range from sensation to memory to cohesion.

The APAT is comprised of 10 subtests that quantify a child’s performance in various areas of auditory processing: Phonemic Awareness, Word Sequences, Semantic Relationships, Sentence Memory, Cued Recall, Content Memory, Complex Sentences, Sentence Absurdities, Following Directions, and Passage Comprehension.

The APAT provides composite index scores as well as individual subtest scores: Global Index reflecting overall auditory processing efficiency, Linguistic Processing Index, and Auditory Memory Index. Optional analyses allow further examination of Linguistic Processing tasks (yielding indices for discrimination, sequencing, and cohesion) and Memory tasks (yielding indices for immediate recall, delayed recall, sequential recall, and cued recall).

The battery is designed primarily to be used by speech-language pathologists but may also be used by other professionals such as learning disabilities specialists, psychologists, and resource specialists.

The APAT is individually administered and can be completed and scored in less than 45 minutes. It yields scaled scores and percentile ranks for subtests and standard scores and percentile ranks for the composites. Age equivalents are also available for all areas assessed.

Test of Auditory Processing Skills—3rd Edition (Spanish Bilingual) (TAPS-3:SBE)

The Spanish version of the Test of Auditory Processing Skills 3rd Edition (TAPS-3, 2005), is NOT just a translation. The TAPS-3:SBE includes new items equivalent to the English version that were reviewed by Spanish-bilingual testing professionals.

The TAPS-3:SBE provides separate norms that are based on 800 Spanish-speaking children in the U.S. ages 5-0 through 18-11.

The structure of the test is similar to the English version but with allowances made for language and grammar differences. Notably, the subtest in the English version that utilized compound words was dropped because such words are extremely rare in Spanish, and new sentences with idioms were developed.

While the test is administered in Spanish and the responses are expected to be in Spanish, the examiner may use English to give directions, if necessary, and English responses may be accepted if the meaning is the same as the intended response. Subtest scoring is the same as in the TAPS-3, allowing partial credit in order to reflect more accurately the child’s processing ability.

Individual subtests are reported as scaled scores, while cluster scores (Phonological Skills, Memory, and Cohesion) and the overall score are reported standard scores; percentile ranks and age equivalents are also provided.

COMPLETE KIT INCLUDES: Manual, 25 Test booklets, 25 Test forms

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COMPLETE KIT INCLUDES: Manual, 25 Test Booklets, and Auditory Figure-Ground CD

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phone 800.257.5376 • fax 800.268.6624

The TAPS-4 provides information about language processing and comprehension skills across three intersecting areas: phonological processing, auditory memory and listening comprehension. These areas underpin the development of effective listening and communication skills, and are critical to the development of higher order language skills, including literacy skills.

The TAPS-4 features new subtests along with revisions to subtests from the TAPS-3, fully updated norms, and an expanded age range. The TAPS-4 subtests were also reorganized into Index and Supplemental subtests, reducing testing burden and increasing flexibility in administration.

The TAPS-4 also features audio administration for the subtests in which proper pronunciation of speech sounds is critical, providing a greater degree of standardization and accuracy during the testing process.

The TAPS-4 has 11 subtests, organized into three indices: Phonological Processing Index; Auditory Memory Index; and Listening Comprehension Index.

The TAPS-4 assesses five narrow abilities across three broad skill areas as defined in the Cattell-Horn-Carroll (CHC) theory of cognitive abilities: Short-Term Memory; Auditory Processing; Comprehension Knowledge.

TAPS-4 Index subtests can be administered in one hour or less. Scaled scores are provided for subtests; standard scores are provided for indices and the overall score. Discrepancy scores allow comparison of performance across subtests.

**COMPLETE KIT INCLUDES:** Manual, 25 Test Booklets, and Administration CD, housed in a portfolio.

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Multiple Auditory Processing Assessment (MAPA-2)

The MAPA-2 is a comprehensive assessment of auditory processing and listening skills. It may be used as a screener to be followed by other behavioral or physiological tests or it may be used for a preliminary diagnosis in the auditory area. The test is administered via CD and can be used in a clinical setting or a sound booth.

The MAPA-2 includes eight different subtests in the three domains (monaural, temporal, and binaural) that ASHA and AAA recommend for auditory processing assessment along with the Scale of Auditory Behaviors, a 12-item parent or teacher completed questionnaire of listening behaviors.

Monaural: Evaluate an individual’s ability to use low redundancy information.

Temporal: Evaluate an individual’s ability to use acoustic information over time.

Binaural: Evaluate an individual’s ability to use unique information presented simultaneously to each ear.

The full MAPA-2 can be administered in about 30–40 minutes. Scoring is easy and straightforward. Raw scores are reported as scaled scores and percentile ranks for subtests, and as standard scores and percentile ranks for the Domains and the Overall score. Additional qualitative analyses of the SINCA, Dichotic Digits, and the Gap Detection subtests are provided. Significant changes in scores over time can be documented with the Reliable Change Index.

The MAPA-2 can be administered either in a clinical audiology environment (sound booth and audiometer) or by using standard circumaural headphones and audio player. Headphones with increased performance in low frequencies and earbud style transducers are NOT recommended because they could alter the outcomes of testing.


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Differential Screening Test for Processing (DSTP)

Determine if your student has difficulty with auditory processing, difficulty with language processing, or a combination of the two. The DSTP is the only test of its kind to differentiate among the various levels of auditory and language processing and identifies areas for referral or further evaluation. The DSTP is a screening instrument to assist professionals in determining if additional diagnostic assessment is warranted and the specific areas of focus for further testing.

The subtest areas of the DSTP represent the neurological continuum of processing acoustic stimuli. Critical skills are evaluated in three major levels: acoustic, acoustic-linguistic, and linguistic. Test vocabulary was carefully chosen to be within the linguistic capabilities of the target population.

**COMPLETE TEST INCLUDES:** Examiner’s Manual, 20 Test Forms, 2 Headphones, Y-Cord Adapter, Audio CD-ROM, 12 Letter Tiles, and 8 Picture Cards, all in a Sturdy Storage Box.

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Augmentative & Alternative Communication Profile: A Continuum of Learning

This profile includes everything you need to assess communicative competence and design intervention for the ever-changing needs of people who use AAC systems.

1. An assessment tool that measures subjective, functional skills for developing communicative competence using AAC systems; re-evaluates skill level; and monitors progress.

2. A guide to help manage clients who use any type of speech-generating AAC system. The profile grew out of the literature related to critical pathways and continuums of care implemented to increase quality of care and efficiency and to reduce costs.

The Profile allows you to identify areas of strengths and those that need intervention and instruction; determine functional, long-range outcomes and the steps toward achieving them; compare individual performance over time toward desired outcomes; identify ways that AAC support team members can define and coordinated their roles for intervention and instruction programs; and identify and provide optimal learning environments

Originally developed for use with children who use speech-generating systems; the AAC Profile is appropriate for use with adults who do not have acquired communication disorders and who use AAC systems. The profile is not specific to a disorder, severity, or setting.

Although the Augmentative & Alternative Communication Profile is best used under the guidance of a speech-language pathologist, it is intended for use by a multidisciplinary team of individuals who have knowledge about the person's physical, cognitive, and social skills as they relate to AAC.


Oral and Written Language Scales—2nd Ed (OWLS-2)

Building on the strong theory and research underpinning the original OWLS, the Second Edition of this highly regarded test offers an integrated, global approach to language assessment. The OWLS-II adds a Reading Comprehension Scale, updated norms, new items, a parallel form, improved scoring guidelines, and full-color stimulus materials. A helpful new handbook, Foundations of Language Assessment, explains the theory upon which the OWLS-II is based, making it easier to understand the test and interpret results.

The four OWLS-II scales, Listening Comprehension, Oral Expression, Reading Comprehension, and Written Expression, give you a complete, accurate, and useful picture of language skills. Each of the four scales assesses four linguistic structures.

COMPREHENSIVE HAND-SCORED KIT INCLUDES: LC/ OE Kit & RC/WE Kit, with a single copy of Foundations of Language Assessment and 10 Profile Forms.


LC/OE HAND-SCORED KIT (FORM B) INCLUDES: 10 LC/OE Record Forms, LC Easel and OE Easel for Form B.


RC/WE HAND SCORED KIT (FORM B) INCLUDES: 10 RC/WE Record Forms (Form B), 10 WE Response Booklet (Form B), RC Easel (Form B), and WE Easel (Form B).
Test of Childhood Stuttering (TOCS)

The Test of Childhood Stuttering (TOCS) provides clinicians and researchers with a sound method for assessing speech fluency skills and stuttering-related behaviors in children aged 4 through 12. Its main purposes are to (1) identify children who stutter, (2) determine the severity of a child’s stuttering, and (3) document changes in a child’s fluency functioning over time. It can also be used as a tool in research on childhood stuttering.

The TOCS is comprised of three major components:

1) STANDARDIZED SPEECH FLUENCY MEASURE: Four speech fluency tasks are used to identify children who stutter and rate the severity of their stuttering.

2) OBSERVATIONAL RATING SCALES: Enables the examiner to gather information about stuttering and related behaviors from parents, teachers, and other individuals who have known the child for an extended period of time.

3) SUPPLEMENTAL CLINICAL ASSESSMENT: Eight supplementary fluency-related assessments enable examiners to probe disfluency-related data in greater detail.


$201.00

Oral Speech Mechanism Screening Examination—3rd Edition (OSMSE-3)

The Oral Speech Mechanism Screening Examination—Third Edition (OSMSE-3) provides an efficient, quick, and reliable method to examine the oral speech mechanism of all types of speech, language, and related disorders where oral structure and function is of concern. Its appeal for all types of clients and problems, ease of administration and scoring, and nearly two decades of continued use in clinical and research efforts set it apart from other oral examinations. The OSMSE-3 is specifically designed for speech-language pathologists who evaluate and treat all kinds of speech and language disorders. The third edition has a number of attractive new features designed to make the instrument easier to administer and score than the previous revision, yet it is still comprehensive and accurate.

COMPLETE KIT INCLUDES: Examiner’s Manual, a pad of 50 Scoring Forms, and a CD, all in a sturdy storage box.

$129.00


SSI-4: Stuttering Severity Instrument - Fourth Edition is a reliable and norm-referenced stuttering assessment that can be used for both clinical and research purposes. It measures stuttering severity in both children and adults in the four areas of speech behavior: (1) frequency, (2) duration, (3) physical concomitants, and (4) naturalness of the individual’s speech. Frequency is expressed in percent syllables stuttered and converted to scale scores of 2-18. Duration is timed to the nearest one tenth of a second and converted to scale scores of 2-18. The four types of Physical Concomitants are converted to scale scores of 0-20. The SSI-4 can also be used in conjunction with the Stuttering Prediction Instruments for Young Children (SPY).

The Fourth Edition of this enduring test continues to provide a reliable measure of stuttering severity--now with updated norms, quicker administration, and computer scoring. Appropriate for anyone over the age of 2 years and 10 months, the SSI-4 is an excellent way to quantify stuttering problems and evaluate the effectiveness of therapy.

The Computerized Scoring of the Stuttering Severity (Version 2; CSSS-2.0) software is provided to facilitate the calculation of frequency and duration. The CSSS-2.0 automatically produces a record of the percentage of syllables stuttered (frequency) and the duration of the three longest stuttering events.

COMPLETE KIT INCLUDES: Examiner’s Manual and Picture Plates, 50 Test Record and Frequency Computation Forms and CSSS 2.0 software.

$170.00

Jaw Rehabilitation Program

The Jaw Rehabilitation Program (JRP) is a step-by-step progression of treatment delineated into 7 outcome levels to develop biting and chewing skills. Beginning goals and objectives target the development of prerequisite sensory and motor skills with goals that follow a progression of treatment to facilitate and strengthen functional patterns of mandibular movement.

The Jaw Rehabilitation Program provides a step-by-step series of treatment exercises, using Chewy Tubes, which are designed to improve sensory and motor skills and to strengthen functional patterns of mandibular movement. All treatment is practiced using Chewy Tubes, rather than real food.

Therapists may also want to use the JRP with patients who need to rehabilitate after a jaw post stroke or craniofacial surgery.

Includes 3 yellow Chewy Tubes, 3 red Chewy Tubes, a Manual, and Jaw Assessment Test Forms, all in a sturdy box.

$120.00
Cognitive Assessment System—2nd Edition (CAS2)

Designed to measure cognitive processing abilities that are important for a broad range of differential diagnoses and instructional planning, the Cognitive Assessment System, Second Edition (CAS2) is a norm-referenced measure based on the well-researched cognitive/neuropsychological theory called PASS (Planning, Attention, Simultaneous, and Successive). It provides practitioners with a valid and reliable tool to evaluate the strengths and weaknesses of children and adolescents in important areas of cognitive processing.

The CAS2 was designed to measure cognitive processing abilities important for a broad range of differential diagnoses and instructional planning in individuals ages 5-0 through 18-11. The CAS2 Extended Battery has three subtests for each of the four PASS scales. The Core Battery includes two subtests from each of the four PASS scales. The CAS2 also yields five supplemental composite scores: Executive Function without Working Memory, Executive Function with Working Memory, Working Memory, Verbal Content, and Nonverbal Content. A visual versus auditory comparison is also provided.

Test of Problem Solving 2: Adolescent (TOPS-2:A)

While other tests may assess thinking skills by tapping mathematical, spatial, or nonverbal potential, the TOPS-2: Adolescent assesses critical thinking abilities based on the student's language strategies using logic and experience. TOPS 2: Adolescent uses a natural context of problem-solving situations related to adolescent experiences and assesses five different decision-making skill areas critical to academic, problem solving, and social success.

Based on the research of Richard Paul, the TOPS 2: Adolescent emphasizes the integrative disposition of critical thinking by focusing on these cognitive processes: understanding/comprehension; analysis; interpretation; self-regulation; evaluation; explanation; inference/insight; decision-making; intent/purpose; problem solving; and acknowledgment.

The test is comprised of five subtests (18 written passages) that assess a student's performance of these skills. The subtests require the student to pay careful attention to, process, and think about what they hear and read; think about problems with a purpose in mind; resist the urge to be impulsive; and express answers verbally.

The Discussion of Performance section found in the Examiner's Manual was developed to guide the examiner to make appropriate and educationally-relevant recommendations for remediation based on a clear understanding of each subtest.

It includes a research-based rationale for the importance of teaching thinking skills, clinically sound information about each task, and the breakdown of how the student's responses reflect his thinking skills.


Test Of Problem Solving—3rd Edition Elementary: Normative Update (TOPS-3E: NU)

The TOPS-3E NU assesses a school-age child’s ability to integrate semantic and linguistic knowledge with reasoning ability by way of picture stimuli and verbal responses.

The TOPS-3E NU focuses on students’ linguistic ability to think and reason. Language competence is the verbal indicator of how a student’s language skills affect his ability to think, reason, problem solve, infer, classify, associate, predict, determine causes, sequence, and understand directions. The test focuses on a broad range of language-based thinking skills, including clarifying, analyzing, generating solutions, evaluating, and showing affective thinking.

While other tests may assess students’ thinking skills by tapping mathematical, spatial, or nonverbal potential, the TOPS-3E: NU measures discreet skills that form the foundation of language-based thinking, reasoning, and problem-solving ability.

The TOPS-3E: NU has three components: an Examiner's Manual, Examiner Record Booklets, and a Picture Book. The Examiner's Manual includes a comprehensive discussion of the test's theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norm tables, and guidelines for using and interpreting the test's results. The Examiner Record Booklet provides space to record responses and transform the raw score to an age equivalent, percentile rank, and the Problem Solving Index. The test kit also includes a Picture Book, which includes the picture stimuli for the test items.

Allen Cognitive Level Screen-5 (ACLS-5)

The Allen Cognitive Level Screen-5 (ACLS-5) and Large Allen Cognitive Level Screen-5 (LACLS-5) are intended to provide a quick measure of learning potential, global cognitive processing capacities and performance abilities. This is achieved with leather lacing tools and instructions to complete 3 stitches of increasing complexity to assist with determining the person's Allen cognitive level.

The Allen Cognitive Level Screen (ACLS) is an evidence-based, standardized screening assessment of functional cognition developed within the framework of the cognitive disabilities model. The ACLS provides a quick estimate of an individual's learning and problem solving abilities during performance of three visual motor tasks of increasing complexity. Scores on the screening assessment are verified through further assessment and interpreted within the framework of the cognitive disabilities model.

The tool used in this screening assessment is available in three forms: the standard Allen Cognitive Level Screen (ACLS), the Large Allen Cognitive Level Screen (LACLS) for persons with vision or hand function problems, and the Disposable Large Allen Cognitive Level Screen (LACLS[D]) for single or serial use with individuals for whom infection control precautions must be observed. All three forms are administered and scored using the Manual for ACLS-5 and LACLS-5 (Allen, Austin, David, Earhart, Mc Craith & Riska-Williams, 2007).

MANUAL: A revised version for administering both the Standard Allen Cognitive Level Screen (SACLS) and the Large Allen Cognitive Level Screen (LACLS). New sections include: Definition of Functional Cognition, History of the Cognitive Disabilities Model, Set Up of the Tools with Photos, Color-Coded Administration Instructions, Revised Scoring Tables, Assigning and Interpreting Scores, Review of Published Research, and four Appendices with References, and Resources for Practitioners. The Manual is a spiral bound notebook and comes with a clear plastic pouch to hold each of the 2 Lacing Leather tools (not included).

STANDARD ALLEN COGNITIVE LEVEL SCREEN (ACLS): Contains: 1 pre-punched 4x5 inch rounded, tan leather rectangle, 1 large-eyed, blunt sewing needle, 2 brass threaded, locking needles, 1 hank of leather lace and 1 hank of wax linen thread. Use with new Manual for ACLS-5 and LACLS-5 (sold separately).

LARGE ALLEN COGNITIVE LEVEL SCREEN (LACLS): This is a large form of the ACLS for persons with impaired vision or hand function who have difficulty using the standard ACLS leather piece. Research studies have demonstrated correspondence with the ACLS. Includes: 1 pre-punched 6x7 inch rounded, tan leather rectangle, 1 shoelace with plastic tips on each end, 2 large brass threaded locking needles, 1 hank of wide leather lace with 2 visibly distinct sides. Use with new Manual for ACLS-5 and LACLS-5 (sold separately).

STANDARD ALLEN COGNITIVE LEVEL SCREENING (ACLS) WITH MANUAL: Contains the newly updated and revised Manual, the ACLS, and a clear plastic storage pouch.

LARGE ALLEN COGNITIVE LEVEL SCREENING (LACLS) TOOL WITH MANUAL: Contains the newly updated and revised Manual, the LACLS, and a clear plastic storage pouch. This is a larger version of the ACLS often used with persons who have impaired vision or hand skills.

DISPOSABLE LACLS: Developed for use where strict infection control procedures must be observed. This fully disposable tool is designed for a single use or serial use with one individual, after which it should be discarded. Materials to set up four screening tools are provided. Each pack includes: 4 disposable chipboard forms, pre-cut shoelace lengths, 4 pieces of 60" lacing to be cut in half for use with each tool, set up instructions unique to the tool and contact information to participate in a feedback survey. Needles are not used with the (LACLS[D]). The “front” of the tool is indicated by the ACLS & LACLS Committee Approved stamp. Follow administration protocol in The Manual for the Allen Cognitive Level Screen-5 (ACLS-5) and Large Allen Cognitive Screen-5 (LACLS-5). Please note: the leather lacing in this product contains natural rubber latex which may cause allergic reactions.

ACLS Lace Replacement Kit To be used with "ACLS and LACLS Committee approved" ACLS assessment tool. Includes: 72" waxed linen thread to replace Running Stitch task thread 4 times, and 60" of 3/32 inch wide leather lace to replace the Whipstitch and Single Cordovan Stitch task. This kit does not include needles. Please note: Caution- The leather lacing in this product contains natural rubber latex which may cause allergic reactions.

LACLS LACE REPLACEMENT KIT: To be used with "ACLS and LACLS Committee approved" ACLS assessment tool. Includes: 1 shoelace to replace Running Stitch task shoelace, and 60" of 3/15 inch leather lace to replace the Whipstitch and Single Cordovan Stitch tasks. This kit does not include needles. Please note: Caution- The leather lacing in this product contains natural rubber latex which may cause allergic reactions.

ACLS NEEDLE REPLACEMENT KIT: Replacement needles for the "ACLS and LACLS Committee approved" ACLS-5 assessment. Includes: 2 permalok needles for the ACLS leather lace stitches and 1 large eye needle for the linen thread stitch. Leather lace and thread not included in this kit.

LACLS NEEDLE REPLACEMENT KIT: Replaces needles for the "ACLS and LACLS Committee approved" LACLS-5 assessment. Includes: 2 permalok needles to be used with the wider LACLS lace for the Whipstitch and Single Cordovan leather lacing stitches. Leather lace and thread not included in this kit.


For a more detailed description of these evaluations, please visit our website: www.therapro.com
Wide Range Assessment of Memory and Learning—2nd Edition (WRAML-2)

The WRAML2 is a carefully standardized psychometric instrument which allows the user to evaluate an individual's memory functioning. It affords evaluation of both immediate and delayed memory ability, as well as the acquisition of new learning. As with the original Wide Range Assessment of Memory and Learning (WRAMLTM), the WRAML2 includes standard scores, scaled scores, and percentiles.

The WRAML2 Core Battery is composed of two Verbal, two Visual, and two Attention/Concentration subtests, yielding a Verbal Memory Index, a Visual Memory Index, and an Attention/Concentration Index. Together, these subtests yield a General Memory Index. A new Working Memory Index has been added, which is comprised of the Symbolic Working Memory and Verbal Working Memory subtests. Four new recognition subtests have been added. The Story Memory subtest includes new stories, and the Picture Memory subtest provides new full-color scenes.


Primary Test of Nonverbal Intelligence (PTONI)

The Primary Test of Nonverbal Intelligence (PTONI) is a theoretically sound, research-based method of assessing reasoning abilities in young children. Psychologists, diagnosticians, special educators, speech-language pathologists, and other professionals can use this test to identify both severe intellectual deficits and superior cognitive intelligence; help estimate future school success based on family history, educational background, and personality traits; and study a wide range of researchable topics and issues.

The nonverbal format of the PTONI is especially appropriate for testing children who typically are not verbally or motorically well developed. Furthermore, directions in eight alternative languages are provide for the PTONI making it an appropriate assessment of intelligence for children from diverse language backgrounds.

This test is composed of an Examiner's Manual, a Picture Book with easel backing, and an Examiner Record Form.

Executive Functions Test—Elementary: Normative Update (EFT-E: NU)

The Executive Functions Test—Elementary: Normative Update (EFT-E: NU) measures language skills that affect executive functions, such as working memory, problem solving, inferring, predicting outcomes, and shifting tasks. It can be used to identify children who have executive-functioning deficits, plan interventions, and represent executive functioning in research studies.

The test has four subtests (Attention and Immediate Memory—Verbal, Attention and Immediate Memory—Nonverbal, Working Memory and Flexible Thinking, and Shifting) that yield scaled scores. A composite score, called the Executive Function Index, represents overall performance on the subtests. The Examiner's Manual includes a comprehensive discussion of the test's theoretical and research-based foundation, item development, standardization, administration and scoring procedures, norms tables, and guidelines for using and interpreting the test's results. Reliability and validity studies were conducted with students with normal language abilities and students who had previously been diagnosed with autism spectrum disorder or learning disabilities.

**Comprehensive Test of Nonverbal Intelligence—2nd Edition (CTONI-2)**

The CTONI-2 is a popular norm-referenced test that uses nonverbal formats to measure general intelligence of children and adults whose performance on traditional tests might be adversely affected by subtle or overt impairments involving language or motor abilities.

The CTONI-2 measures analogical reasoning, categorical classification, and sequential reasoning, using six subtests in two different contexts: Pictures of familiar objects (e.g., people, toys, animals) and geometric designs (unfamiliar sketches and drawings). The six subtests are: (1) Pictorial Analogies, (2) Geometric Analogies, (3) Pictorial Categories, (4) Geometric Categories, (5) Pictorial Sequences, and (6) Geometric Sequences.

The CTONI-2 generates six subtest and three composite scores: Global Nonverbal IQ, Pictorial Nonverbal IQ, and Geometric Nonverbal IQ. All are provided as standard scores, percentile ranks, and age equivalents. The test was standardized on a nationally representative sample of 2,827 individuals between the ages of 6-0 and 89-11. Norms are stratified by age, and this second edition eliminates floor effects.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, Analogies Picture Book, Categories Picture Book, Sequences Picture Book, and 25 Examiner Record Forms, all in a sturdy storage box.

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<td>EVA52622</td>
<td>CTONI-2 Examiner Record Forms (25)</td>
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**Test of Nonverbal Intelligence—4th Edition (TONI-4)**

The Test of Nonverbal Intelligence is a practical, easy-to-use, norm-referenced instrument that measures an individual’s intelligence. The administration and response format are pragmatic with simple oral instructions, requiring test takers to answer only with simple but meaningful gestures such as pointing, nodding, or blinking. This test is ideal for those who have language, hearing, or motor impairments, or are not familiar with mainstream American culture.

The TONI-4 has two equivalent forms: Form A and Form B. Each form consists of 60 items, all of which are abstract/figural (i.e., void of pictures or cultural symbols), thus educational, cultural, or experiential backgrounds will not adversely affect test results. All items are arranged in easy-to-difficult order. Each item contains one or more of the eight salient characteristics: shape, position, direction, rotation, contiguity, shading, size, and movement.

Easier items contain one or two characteristics, while the more difficult items contain several. Use either or both forms for periodic reevaluation and research purposes.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, Picture Book, Critical Reviews and Research Findings (1982-2009), 50 Form A Answer Booklets and Record Forms, 50 Form B Answer Booklets and Record Form, all in sturdy storage box.

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**Mini-Mental State Examination—2nd Edition (MMSE-2)**

With a new standard version that is equivalent to the original MMSE and new and expanded forms, the MMSE-2 retains clinical utility and efficiency while expanding the original’s usefulness in populations with milder forms of cognitive impairment, including subcortical dementia.

The original MMSE is one of the most frequently used brief assessments of cognitive impairment. It can be used to track patients’ progress over time, to screen large populations for cognitive impairment, and to select patients for clinical trials research in dementia treatment.

A Kit is not available for the MMSE-2: Brief Version. If Examiner wants to use the Brief Version, the Brief Version Blue Forms, the Brief Version Red Forms, User’s Manual and Pocket Norms Guide should be purchased.


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*For a more detailed description of these evaluations, please visit our website: www.therapro.com*
Dynamic Loewenstein Occupational Therapy Cognitive Assessment (DLOTCA)

The Dynamic LOTCA is a series of cognitive tests that enables a therapist to evaluate clients with neurological deficits in order to obtain a detailed cognitive profile, enabling intervention planning for management and maintenance. DLOTCA builds off the research used to develop the original LOTCA series and incorporates a dynamic component providing the ability to measure learning potential and recognize thinking strategies through the use of mediation. In addition, it enables the therapist to identify the level of awareness the client has to his/her condition and cognitive disability.

Bay Area Functional Performance Evaluation (BaFPE)

A two-part, behaviorally-anchored assessment designed to assess how a client may function in task-oriented and social interactional settings.

The Task Oriented Assessment (TOA) utilizes five tasks in which twelve functional parameters in cognitive, performance, and affective areas are rated. Observations about specific cognitive and neuropsychological functioning are made during each task. The Social Interaction Scale (SIS) measures the level of social competency through assessment of seven areas of social functioning via observation in five different social situations. These situations are observed in activities that are generally part of any therapeutic milieu program.

The BaFPE™ has been used in inpatient and outpatient settings to evaluate the functional performance of psychiatric, brain injured, geriatric, or developmentally disabled adults or adolescents as well as adolescents in treatment or special education settings. It can be used for treatment, discharge planning, documentation and outcome studies.

Dynamic Occupational Therapy Cognitive Assessment for Children (DOTCA-Ch)

Finally, an evaluation designed to provide a baseline measurement of perceptual, motor and cognitive interventions for children who are referred for treatment as a result of possible developmental, cognitive, or academic and learning difficulties and for children with brain injuries. Some of the subtests were designed to provide information regarding speed of performance, as well as immediate and delayed memory capabilities. Includes 22 subtests in the following 3 areas of cognition: Orientation, Spatial Perception, Praxis, Visuomotor Construction and Thinking Operations.

Dynamic Occupational Therapy Cognitive Assessment—Geriatric—2nd Edition (DLOTCA-G)

The Dynamic LOTCA is a series of cognitive tests that enables a therapist to evaluate clients with neurological deficits in order to obtain a detailed cognitive profile, enabling intervention planning for management and maintenance. DLOTCA builds off the research used to develop the original LOTCA series and incorporates a dynamic component providing the ability to measure learning potential and recognize thinking strategies through the use of mediation. In addition, it enables the therapist to identify the level of awareness the client has to his/her condition and cognitive disability.

DLOTCA-G Described to be used with clients aged 70 and over and specifically addresses physical and mental factors that can accompany aging by offering larger components, reduced pictorial detail, multiple choice questions, and shorter administration time. Consists of 21 subtests in 5 cognitive areas: Orientation, Awareness, Visual Perception, Spatial Perception, Praxis, Visuomotor Construction, Thinking Operations and Memory.

It was designed to provide standardized testing procedures and established norms for systematic data collection in cognitive assessment.

Scoring is on an ordinal scale of 1-4 (1-severe deficit and 4-average performance), except for orientation were scores range from 1-8. The test is a performance test with minimal verbal requirement except for orientation. Memory includes delayed recall and recognition.

Complete BaFPE Kit .......................................................... $512.95
Dynamic Occupational Therapy Cognitive Assessment for Children (DOTCA-Ch) .......................................................... $795.50
Dynamic Occupational Therapy Cognitive Assessment—Geriatric—2nd Edition (DLOTCA-G) .......................................................... $356.00
Behavior Rating Inventory of Executive Function (BRIEF-2)

An enhanced rating scale of executive function that continues to be as efficient, comprehensive, and consistent with current models of executive function as its predecessor but now includes a quick screener and enhanced features.


Behavior Rating Inventory of Executive Function—Preschool Version (BRIEF-P)

The observations of parents and teachers provide a wealth of information about a child’s behavior that is directly relevant to an understanding of that child’s executive functioning. The assessment of executive function in preschool-aged children is often difficult because of the variable nature of behavior in this age range (ages 2.0–5.11 years); the limitations in motor and verbal proficiency at this age; and the many neuropsychological, psychological, developmental, and other medical conditions that begin to manifest during the preschool years. The BRIEF-P is the first standardized rating scale designed to specifically measure the range of behavioral manifestations of executive function in preschool-aged children—thus facilitating intervention at earlier stages of development.

The BRIEF-P consists of a single Rating Form used by parents, teachers, and day care providers to rate a child’s executive functions within the context of his/her everyday environments—home and preschool. It measures multiple aspects of executive functioning; scales include Inhibit, Shift, Emotional Control, Working Memory, and Plan/Organize.

Cognitive Performance Test (CPT) REVISED 2018

The Cognitive Performance Test (CPT) is a standardized occupational therapy assessment of functional cognition. Therapists examine cognitive integration with functioning in an IADL-environmental context and rate executive processing across seven subtasks for an average score. The CPT is used to explain and predict capacity to function in various contexts and guide intervention plans, it measures and tracks the severity of a cognitive-functional disability by means of baseline and serial assessment.

The CPT Revised Manual 2018 uses an updated construct and language consistent with advances in cognitive neuroscience and what is known about neurocognitive disorders (NCDs) and the memory systems of mild and major NCDs.

CPT Revised 2018 Includes:

- Updates based on cognitive neuroscience and CPT research in early NCDs
- Administration protocols and props (Props for subtasks Medbox, Shop, Wash, and Toast are included; Subtasks Phone, Dress, and Travel are location specific with prop instructions included)
- Task analyses for each subtask and easier to use protocols
- CPT Profiles for evidence-based intervention in IADL/ADL, Independent living and care
- Documentation Template and Billing Code
- Reference list of empirical studies published since 1990 thru 2018

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Cognitive Assessment of Young Children (CAYC)

The Cognitive Assessment of Young Children (CAYC) is a newly developed easy-to-administer screening and assessment tool used to identify children with developmental delays. It is based on the same reliable, successful, theoretical model upon which the DASI (Developmental Activities Screening Inventory) and DASI-II were both designed.

The CAYC consists of 107 structured, play-based items in six age-related levels. Each level consists of developmental and megacognitive tasks, including, but not limited to the following: (a) fine motor coordination and planning, (b) interactive communication and play, (c) memory, (d) reasoning, (e) perceptual development, (f) processing, (g) classification and organizational skills, (h) concept development, (i) practical knowledge, and (j) components of early learning skills. Items increase sequentially in difficulty. The child being tested must have sufficient hearing, vision, and motor skills in order to understand and respond to test items.

**COMPLETE KIT INCLUDES:** Examiner's Manual, Card Kit, Examiner's Record Booklet, and an Object Kit, all in a sturdy storage box.

- **EVA1493** Complete CAYC Kit .................................................. $622.00
- **EVA1494** CAYC Card Kit .......................................................... $67.00
- **EVA1495** CAYC Examiner's Manual .......................................... $94.00
- **EVA1496** CAYC Examiner's Record Booklets (25) ....................... $87.00
- **EVA1497** CAYC Object Kit ...................................................... $384.00

Test of Memory and Learning—Senior Edition (TOMAL-SE)

Why a memory test just for the senior population? After TBI patients, seniors are the most likely group to exhibit memory issues, yet most memory batteries are either too long for them—they fatigue more easily and become progressively more distractible than younger examinees—or are very short, assessing only 1 or 2 aspects of memory. The TOMAL-SE is just right! Long enough to assure a thorough assessment yet short enough to enhance motivation and the ability to stay on task and give appropriate effort on the entire battery.

The instrument includes six core subtests (Memory for Stories, Facial Memory, Word List Learning, Object Recall, Visual Sequential Memory, and Memory for Location) and three delayed recall tasks that evaluate general and specific memory functions. Two composite memory scores (Verbal Memory and Nonverbal Memory) and a Composite Memory Index are also provided. Supplementary composite scores include a Verbal Delayed Recall Index and a Learning Index.

**COMPLETE KIT INCLUDES:** Examiner's Manual, Picture Book, 25 Examiner Record Booklets, and 15 Chips in Vinyl Envelope, all in a sturdy storage box.

- **EVA526990** Complete TOMAL-SE Kit ......................................... $247.00
- **EVA526991** TOMAL-SE Examiner's Manual ............................... $78.00
- **EVA526992** TOMAL-SE Picture Book ......................................... $108.00
- **EVA526993** TOMAL-SE Examiner Record Booklets (25) ............... $50.00
- **EVA526994** TOMAL-SE Chips (15) ............................................. $11.00

Comprehensive Trail-Making Test (CTMT)

The Comprehensive Trail-Making Test (CTMT) is a assessment based on time-tested techniques. The CTMT is a standardized set of five visual search and sequencing tasks that are heavily influenced by attention, concentration, resistance to distraction, and cognitive flexibility (or set-shifting). Its primary uses include the diagnosis of brain injury and other forms of central nervous system compromise. More specific purposes include the detection of frontal lobe deficits; problems with psychomotor speed, visual search and sequencing, and attention; and impairments in set-shifting.

Neuropsychological testing is necessary in a variety of contexts and performed by a variety of professionals. Neuropsychologists; clinical, counseling, school, and pediatric psychologists; occupational therapists; speech and language professionals; physical therapists; and others interested in objective testing of functionality in brain-behavior relationships would all benefit from using the CTMT.

**COMPLETE KIT INCLUDES:** Examiner's Manual & 10 Record Booklets, all in a sturdy storage box.

- **EVA526130** Complete CTMT Test ........................................... $145.00
- **EVA526131** CTMT Examiner's Manual ....................................... $83.00
- **EVA526132** CTMT Record Booklets (10) .................................... $71.00

Test of Information Processing Skills (TIPS)

The TIPS provides clinicians with quick and reliable measures of how well a person processes information (letter strings) presented visually and auditorily. Short-term and working memory responses show differences between sequenced and non-sequenced retention (a hallmark of those with learning disabilities). Error analyses (Proactive Inhibition and Auditory Intrusion) document the extent to which new information is lost or its retention is inhibited.


- **EVA53121** Complete TIPS Kit .................................................. $160.00
- **EVA53122** TIPS Manual .......................................................... $60.00
- **EVA53123** TIPS Protocols (25) .................................................. $45.00
- **EVA53124** TIPS Stimulus Card Booklet ...................................... $55.00
Behavioral and Emotional Rating Scale—2nd Edition (BERS-2)

*Purpose:* To identify children’s individual behavior and emotional strengths, and indicate the areas in which strengths need to be developed.

* Ages: 5-0 to 18-11 years
* Admin Time: 10 minutes
* Author: Michael H. Epstein, EdD

Information from the BERS-2 is useful in evaluating children for prereferral services, in placing children for specialized services, and in measuring the outcomes of services. The BERS-2 can identify children’s individual behavior and emotional strengths and the areas in which individual strengths need to be developed.


**EVA526168** Complete BERS-2 Kit ............................................................... **$208.00**

**EVA526169** BERS-2 Manual ................................................................. **$73.00**

**EVA526170** BERS-2 Parent Rating Scale (25) .......................................... **$39.00**

**EVA526171** BERS-2 Parent Rating Scales-Spanish Version ......................... **$36.00**

**EVA526172** BERS-2 Summary Form (pad of 50) ....................................... **$39.00**

**EVA526173** BERS-2 Summary Forms-Spanish Version ............................... **$36.00**

**EVA526174** BERS-2 Teacher Rating Scale (25) ......................................... **$39.00**

**EVA526175** BERS-2 Teacher Rating Scales-Spanish Version ...................... **$36.00**

**EVA526176** BERS-2 Youth Rating Scale (25) ............................................ **$39.00**

**EVA526177** BERS-2 Youth Rating Scales-Spanish Version .......................... **$36.00**

Conduct Disorder Scale (CDS)

The Conduct Disorder Scale (CDS) is an efficient and effective instrument for evaluating students exhibiting severe behavior problems who may have Conduct Disorder. It is the only test of its kind that provides standard scores for use in identifying students with Conduct Disorder. The 40 items on the CDS describe the specific diagnostic behaviors characteristic of persons with Conduct Disorder. These items comprise four subscales representing the core symptom clusters necessary for the diagnosis of Conduct Disorder: Aggressive Conduct, Non-aggressive Conduct, Deceitfulness and Theft, and Rule Violations.

The CDS is designed to help in the diagnosis of Conduct Disorder and can be administered by anyone who has had direct, sustained contact with the referred individual. Items on the subscales have strong face validity because they are based on the diagnostic criteria for Conduct Disorder published in the Diagnostic and Statistical Manual of Mental Disorders: Fourth Edition-Text Revision (DSM-IV-TR).

**EVA526126** CDS: Complete Kit ................................................................. **$105.00**

**EVA526127** CDS: Examiner Manual ........................................................ **$65.00**

**EVA526128** CDS: Summary/Response Forms ........................................... **$50.00**

Social Profile: Assessment of Social Participation in Children, Adolescents and Adults

Social participation includes a broad spectrum of human behavior, and social interaction, engagement, and cooperation become more complex as people develop and age. Based on the natural social development of children, adolescents, and adults, the Social Profile is a psychological instrument designed to assess behavioral interactions.

The Social Profile is designed to assess whether groups and individuals interact appropriately for their developmental stage and the activity in which they are engaged. This new instrument allows therapists, group leaders, and teachers with training in behavior observation to assess specific behaviors across five levels of participation and cooperation.

The full Social Profile has 40 items, divided into three topics of Activity Participation, Social Interaction and Group Membership/Roles. There are two versions of the Social Profile, the Children’s Version and the Adult/Adolescent Version. The first three levels of the Adult/Adolescent Version make up the Children’s Version which has 27 items.

**EVA67701** Test Kit: Manual and Flash Drive with all Forms ....................... **$140.00**

Evaluating Acquired Skills in Communication—Third Edition (EASIC-3)

Evaluating Acquired Skills in Communication—Third Edition (EASIC-3) is a five-level inventory developed for use with children who are developmentally disabled, have autism, or have moderate to severe cognitive and language disorders. It provides assessment items in the areas of prelinguistic skills, semantics, syntax, morphology, and pragmatics.

Some new features of EASIC-3: New assessment items are included; Developmental age ranges have been updated; Profiles have been restructured to correspond to revised inventory items; Developmental Age Charts (Appendix A) correspond to the revised developmental data; and Goals and Objectives List (Appendix B) correspond to the new item hierarchy on the Inventories and Profiles.

**COMPLETE KIT INCLUDES:** Manual, Picture Book, a set of Picture Cards, 10 Prelanguage Inventory Booklets, 10 Receptive I & II Inventory Booklets, 10 Expressive I & II Inventory Booklets, 10 Prelanguage Profile Forms, 10 Receptive I & II Profile Forms, 10 Expressive I & II Profile Forms, a Developmental Age Charts (Appendix A), and a Goals and Objectives List (Appendix B), all in a sturdy storage box.

**EVA526197** Complete EASIC-3 Kit ......................................................... **$203.00**

**EVA526198** EASIC-3 Expressive I Refill Kit ........................................... **$42.00**

**EVA526199** EASIC-3 Expressive II Refill Kit ........................................... **$42.00**

**EVA526200** EASIC-3 Prelanguage Refill Kit ............................................ **$42.00**

**EVA526201** EASIC-3 Receptive I Refill Kit ............................................. **$42.00**

**EVA526202** EASIC-3 Receptive II Refill Kit ............................................ **$42.00**

For a more detailed description of these evaluations, please visit our website: [www.therapro.com](http://www.therapro.com)
Social Responsiveness Scale—2nd Edition (SRS-2)

The second edition of this highly regarded autism assessment offers the convenience of a screener and the power of a diagnostic tool. Completed in just 15 to 20 minutes, the SRS-2 identifies social impairment associated with autism spectrum disorders (ASDs) and quantifies its severity. It’s sensitive enough to detect even subtle symptoms, yet specific enough to differentiate clinical groups, both within the autism spectrum and between ASD and other disorders. And, with an expanded age range, the SRS-2 can be used to monitor symptoms throughout the life span.

**COMPREHENSIVE KITS (AGES 2-1/2 TO ADULT)**

- **HAND SCORED KIT INCLUDES**: Includes 25 School-Age AutoScore Forms; 25 Preschool AutoScore Forms; 25 Adult AutoScore Forms; 25 Adult Self Report AutoScore Forms; Manual.
- **SOFTWARE KIT INCLUDES**: Includes all components listed above plus Unlimited Use Administration and Scoring CD.
- **CHILD/ADOLESCENT HAND SCORED KIT INCLUDES**: Includes 25 School-Age AutoScore Forms; 25 Preschool AutoScore Forms; Manual.
- **CHILD/ADOLESCENT SOFTWARE KIT INCLUDES**: Includes all components listed above plus Unlimited Use Administration and Scoring CD.

**Gilliam Asperger Disorder Scale (GADS)**

The Gilliam Asperger Disorder Scale is a norm referenced test designed to evaluate children with unique behavioral problems who may have Asperger’s Disorder. Based on the most current and relevant definitions and diagnostic criteria of Asperger’s Disorder, the GADS is useful for contributing valuable information toward the identification of children who have this disorder. Easily completed by a parent and professional who knows the child, the GADS provides documentation about the essential behavior characteristics of Asperger's Disorder necessary for diagnosis. It can be used with confidence in the assessment process, documenting behavioral progress, targeting goals for IEPs, and for research purposes.

- **Purpose**: Distinguishes between Asperger Disorder, autism and other behavioral disorders
- **Ages**: 3-0 to 22-0 years
- **Admin Time**: 5-10 minutes
- **Author**: James E. Gilliam

**Psychoeducational Profile—3rd Edition (PEP-3)**

The third edition of the popular Psychoeducational Profile: Third Edition (PEP-3) allows you to assess the skills and behaviors of children with autism and communicative disorders with a developmental age between 6 months and 7 years. The profile resulting from the PEP 3 graphically charts uneven and idiosyncratic development, emerging skills, and autistic behavioral characteristics. Individually administered in 45 to 90 minutes the PEP-3 meets the need for an assessment tool to assist in the educational programming for young children (ages 3 through 5) with disabilities and is particularly useful in planning for older students’ Individualized Education Programs (IEPs).

- **Purpose**: To assess the skills and behaviors of children with autism and communicative disorders
- **Ages**: 6 months to 7 years
- **Admin Time**: 45-90 minutes
- **Authors**: Eric Schopler, PhD, Margaret D. Lansing, Robert J. Reichler, M.D., & Lee M. Marcus

**ADULT KITS (AGES 19 AND UP)**

- **ADULT HAND SCORED KIT INCLUDES**: Includes 25 Adult AutoScore Forms; 25 Adult Self-Report AutoScore Forms; Manual.
- **ADULT SOFTWARE KIT INCLUDES**: Includes all components listed above plus Unlimited Use Administration and Scoring CD.

**FREE ASSESSMENT RESOURCES**

- **SRS-2 Child/Adolescent Software Kit**
- **SRS-2 Adult Autoscore Form (25)**
- **SRS-2 Software Kit**
- **SRS-2 Adult Self-Report Autoscore Form (25)**
- **GADS Manual**
- **GADS Summary/Response Booklets**
- **PEP-3 Caregiver Report Forms (10)**
- **PEP-3 Response Booklets (10)**
- **PEP-3 Examiner Scoring Booklets (10)**
- **PEP-3 Picture Book**
- **PEP-3 Scoring Software & Reporting System**
- **Complete PEP-3 Kit**
- **Complete GADS Kit**
- **Complete GADS Kit**

**CONTACT INFORMATION**

- **Phone**: 800.257.5376
- **Fax**: 800.268.6624
**Complete Kit Includes:** Examiner’s Manual, 10 Profile/Scoring Forms.

**Purpose:** Provides a framework for improving communication and social-emotional abilities in preschool and primary school students with autism spectrum disorders

**Ages:** 3 to 12 years

**Admin Time:** 5-10 minutes

**Authors:** Barry M., Ph.D., Prizant, Amy M., Wetherby, Emily M., Rubin, Amy C., Laurent, Patrick J., Ph.D., Rydell

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**Social Communication/ Emotional Regulation/ Transactional Support (SCERTS)**

A groundbreaking synthesis of developmental, relationship-based, and skill-based approaches, The SCERTS Model provides a framework for improving communication and social-emotional abilities in preschool and primary school students with autism spectrum disorders (ASD) and their families. Developed by internationally recognized experts, SCERTS supports developmental progress in three areas: Social Communication (communicating spontaneously and establishing relationships), Emotional Regulation (regulating emotional arousal to support learning and engagement), and Transactional Supports (elements that aid a child's progress as he or she works toward a goal).

**VOLUME I: ASSESSMENT** gives detailed background information on The SCERTS Model and guides professionals through the assessment process.

**VOLUME II: INTERVENTION** gives early interventionists explicit instruction on how to help children reach their goals following assessment.

**Semi-structured yet flexible enough to respond to individual differences, SCERTS can be applied in many different settings and used with other intervention approaches. With this child- and family-centered model, based on over two decades of research and clinical experience, early interventionists will have everything they need to evaluate and promote the social and emotional development of children with ASD.**
**School Motivation and Learning Strategies Inventory (SMALSI)**

Measure student learning strategies early and intervene proactively. Poor study skills, ineffective learning strategies, test anxiety—all of these things impede academic success. And they often go unrecognized until a student enters college and is placed in a remedial program.

The SMALSI is available in three forms. The Child Form is for students 8 through 12 years of age; the Teen Form is for 13- to 18-year-olds; and the new College Form is for college students at all levels. The Child and Teen Forms can be administered using an audio CD that allows poor readers, who are often at risk for academic failure, to hear rather than read test items.

Unlike many other measures, the SMALSI does not focus on learning styles or preferences. Instead it assesses the strategies that students actively use in learning and test taking—strategies repeatedly shown to affect academic performance. This practical, specific focus makes the SMALSI ideal for both routine school wide screening and targeted assessment of students with ADHD, learning disabilities, low motivation, or emotional problems.

**Purpose:** Provides a quick, cost-effective way to identify and target poor learning strategies that affect academic performance.

**Ages:** 8 to 18 years

**Admin Time:** 20-30 minutes

**Authors:** Sharon Kenmotsu & Katy Tressler

**Educational Assessment of School Youth for Occupational Therapists (EASY-OT)**

Developed by occupational therapists, the EASY-OT is an assessment tool that lives up to its name. Quickly evaluate students, write in-depth reports, and take charge of your occupational therapy caseload. The EASY-OT consists of four different developmental assessment forms made for students from preschool through high school, as well as those who are severe and profound, autistic, physically disabled and low-functioning. Each version looks at the areas of fine-motor, gross-motor, visual perceptual, visual-motor and self-help skills. All the Assessment Forms (except for the Low-Functioning form) contain a chart for recording observations of the students being tested.

Includes: 4 different Assessment Forms: 1) Pre-Kindergarten-2nd Grade; 2) Grades 3-8; 3) Grades 9-12, and 4) Low Functioning (for students with developmental or physical disabilities). Each form assesses developmentally appropriate, school-related skills in 5 areas: Fine Motor, Gross Motor, Visual-Perceptual, Visual Motor and Self-Help.

The Screenning Form and Annual Report Form assist in IEP planning and determining eligibility for services. All forms are contained on an unlimited-use CD; the EASY-OT can be completed manually or on a PC.

**COMPLETE KIT INCLUDES:** Unlimited-Use CD; Manual; Test Templates (set of 18); 1 Assessment Form for Pre-K-2nd Grade; 1 Assessment Form for Grades 3-8; 1 Assessment Form Grades 9-12; 1 Low Functioning Assessment Form; 1 Screening Form; 1 Annual Report Form; 1 Sensory Processing Skills Addendum; 1 Life Skills Addendum.

**Purpose:** Assesses developmental tasks that relate to school skills.

**Ages:** Pre-K to Grade 12

**Admin Time:** n/a

**Authors:** Kathy Chatham Stroud, Ph.D., and Cecil R. Reynolds, Ph.D.

**Children’s Academic Intrinsic Motivation Inventory (CAIMI)**

For students with academic difficulties, the CAIMI is an excellent resource for differentiating motivation from achievement and ability factors.

A valuable part of a psychodiagnostic battery, the CAIMI provides information useful for counseling students with regard to academic interests and course selection, instructional planning to stimulate motivation in weak areas and facilitate intrinsic motivation in strong areas, individualized program planning, and program and educational evaluation by schools and school districts.

The 44 CAIMI questions comprise 122 items in five scales: Reading, Math, Social Studies, Science, and General. Results can be reported as T scores or percentiles, and the Profile Form allows a visual comparison of motivational strengths across scales.

The CAIMI is the basis for the construct of gifted motivation, which addresses the concept that individuals with exceptionally high intrinsic motivation have a history of higher academic competence and functioning.

**Introductory Kit Includes:** Manual, 50 Test Booklets and 50 Profile Forms.

**Purpose:** Measure motivation for learning in general and across specific learning areas.

**Ages:** 9 to 14 years

**Admin Time:** 20-30 minutes

**Author:** Adele E. Gottfried, PhD
Schoodles School Fine Motor Assessment—4th Edition (SFMA)

Schoodles School Fine Motor Assessment (SFMA) - 4th Edition is a comprehensive, qualitative assessment for children ages 3 and older. Occupational therapists are increasingly being asked to assist with RTI (Response to Intervention) screens in addition to assessing and determining need for service. The 4th Edition is packed with new information and tools that occupational therapists working in schools need for screens, evaluations and annual updates.

Therapists will be able to understand and describe the underlying causes of fine motor challenges by referring to the detailed guidebook and the skill chart. Information gathering will be simple and structured using the updated clinical observation form and reproducible workbook pages. Meaningful goals can be written to support student growth using the goal writing chart. Findings and recommendations can be presented to educational teams with confidence.

The SFMA is a fully norm-referenced, comprehensive diagnostic test of written expression that identifies students who need special help, docu-

Schoodles School Keyboarding Assessment: An Assessment and Interpretation Tool for Keyboarding Skills

Includes questions and answers school therapists ask themselves when trying to decide how best to help a student struggling with handwritten work. This new assessment is the result of many discussions and in-depth research regarding how keyboarding fits into the scope of occupational therapy practice and includes a variety of activities to aid decision making.

Includes a Background Information Form, a Teacher Question Form, a Student Question Form and a detailed Record Sheet to gather information. In addition, there are typing samples to copy, links to timed tests and links to keyboarding programs for intervention. Forms are meant to be copied.

The workbook helps therapists compare handwritten work to work produced on a keyboard. There is an assessment of classroom skills and supporting skills needed to evaluate, decide on service, and create interventions to help students become successful keyboarders in school.

Test of Written Language—4th Edition (TOWL-4)

The fourth edition of Test of Written Language (TOWL-4) is a norm-referenced, comprehensive diagnostic test of written expression that identifies students who need special help, documents specific areas of strength or weakness, and monitors the effectiveness of remedial efforts to improve writing skills.

The TOWL-4 has two forms (i.e., Form A and Form B), each of which contains seven subtests. The subtests represent the conventional, linguistic, and conceptual aspects of writing. The subtests are Vocabulary, Spelling, Punctuation, Logical Sentences, Sentence Combining, Contextual Conventions, and Story Composition.

Three composites are produced: Overall Writing, which uses both spontaneous and contrived formats; Contrived Writing, which uses only contrived formats; and Spontaneous Writing, which evaluates spontaneously composed essays.

The test provides percentiles, standard scores, age equivalents, and grade equivalents for each subtest. In addition, three Composite Scores are available: Overall Writing, Contrived Writing, and Spontaneous Writing. Norms, based on an age- and grade-stratified sample of 2,505 individuals from 18 states, reflect the demographic characteristics of the U.S. population.

Studies reported in the Manual document the predictive validity of the TOWL-4 and demonstrate that the test is unbiased relative to gender and race. The TOWL-4 is extremely helpful to professionals who assess and treat writing deficits.

COMPLETE KIT INCLUDES: Examiner’s Manual, 3 Large Picture Cards, 50 4-page Record/Story Scoring Forms; 25 12-Page Student Response Booklets, Form A; 25 12-Page Student Response Booklets, Form B, and a Supplemental Practice Scoring Booklet, all in a sturdy storage box.

Academic Skills
Test of Early Written Language—3rd Edition (TEWL-3)

The TEWL-3 measures written expression in children, assessing both mechanics and content, and comprises two subtests: the Basic Writing Subtest (used to assess the understanding of language and use of writing tools) and the Contextual Writing Subtest (used to measure the ability to construct a story when provided with a picture prompt). An Overall Writing Index can be derived when using both subtests, which allows for a complex understanding of the child's writing abilities. Scores are reported in standard scores, percentiles, and age and grade equivalents. TEWL-3 includes two equivalent forms for the purpose of monitoring improvement. The TEWL-3 provides standard score indexes for age and grade percentiles, and age and grade equivalents.

The selection of items and the development of the subtests are grounded in the available research literature and other evidence of developing literacy ability, including curriculum guides and classroom activities. Item types were selected only if recognized experts in the field have related them to developing literacy abilities. Though using a different format, the TEWL-3 is a companion to the TOWL-4 and extends the assessment range to younger children.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, 10 Administration/Record Booklets (Form A), 10 Administration/Record Booklets (Form B), 10 Student Workbooks (Form A), 10 Student Workbooks (Form B), and 3 Picture Cards, all in a sturdy storage box.

**EVA526133** Complete TEWL-3 Kit ........................................... $289.00
**EVA526134** TEWL-3 Manual ................................................ $79.00
**EVA526135** TEWL-3 Profile/Record Booklets Form A (10) .... $37.00
**EVA526136** TEWL-3 Profile/Record Booklets Form B (10) .... $37.00
**EVA526137** TEWL-3 Student Workbooks Form A (10) ....... $69.00
**EVA526138** TEWL-3 Student Workbooks Form B (10) ....... $69.00
**EVA526139** TEWL-3 Picture Cards ........................................... $26.00

Test of Written Spelling—5th Edition (TWS-5)

The Test of Written Spelling®: Fifth Edition (TWS-5) is an accurate and efficient instrument that uses a dictated-word format to assess spelling skills in school-age children and adolescents. It has two forms that can be administered in 20 minutes to either individually or in groups. Each form contains 50 spelling words drawn from eight basal spelling series and graded word lists. The TWS-5 provides percentiles, standard scores, age and grade equivalents. The Answer and Record Form offers a convenient way to record and keep track of scores, summarize the results, and indicate any comments and recommendations.

The TWS-5 was normed on a representative sample of 1,634 students from 23 U.S. states. The analyses show no gender or racial bias in the TWS-5 items. Test reliability was studied in various ways: coefficient alphas, alternate form (immediate administration), test-retest, alternate form (delayed administration), and interscorer. All coefficients are over .90, which indicates the test’s high reliability. Additional studies confirmed the TWS-5’s content-description, criterion-prediction, and construct-identification validity. Especially encouraging are the new studies of the test’s sensitivity, specificity, and ROC/AUC.

The results of the TWS-5 can be used for three specific purposes: to identify students whose scores are significantly below those of their peers and who might need interventions designed to improve spelling proficiency, to document overall progress in spelling as a consequence of intervention programs, and to serve as a measure for research efforts designed to investigate spelling.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, 50 TWS-5 Answer and Record Forms, and 1 Laminated Double-sided Card with Stimulus Words, all in a sturdy storage box.

**EVA052611** Complete TWS-5 Kit ........................................... $132.00
**EVA052612** TWS-5 Answer & Record Form (50) ............... $54.00
**EVA052613** TWS-5 Examiner’s Manual ................................ $67.00
**EVA052614** TWS-5 Stimulus Word Cards ................................ $12.00

Diagnostic Achievement Battery—4th Edition (DAB-4)

The DAB-4 is a revision of one of the most popular individual achievement tests available. Its 8 subtests identify students’ strengths and weaknesses across important areas of school achievement. A supplemental manual shows how to probe student responses to obtain information about students’ thinking processes and problem-solving strategies.

The eight subtests are: Listening Comprehension, Synonyms, Alphabet/Phonics/Word Identification, Reading Comprehension, Punctuation/Capitalization, Spelling, Mathematics Reasoning, and Mathematics Calculation. Five composites are: Spoken Language, Reading, Writing, Mathematics, and Total Basic Academic Skills.

The DAB-4 has four primary uses. It can be used to (1) identify students who are significantly below their peers in basic academic skills, (2) determine the particular kinds of component strengths and weaknesses that individual students possess, (3) document students’ progress in specific areas as a consequence of special intervention programs, and (4) conduct research studies of academic achievement.

**COMPLETE KIT INCLUDES:** Manual, Student Booklet, 25 Profile/Examiner Record Booklets, 25 Student Response Booklets, Assessment Probes, and an audio CD, all in a sturdy storage box.

**EVA526000** Complete DAB-4 Kit ........................................... $391.00
**EVA526001** DAB-4 Manual ................................................ $104.00
**EVA526002** DAB-4 Student Booklet ..................................... $69.00
**EVA526003** DAB-4 Profile/Examiner Record Booklets (25) ..... $77.00
**EVA526004** DAB-4 Student Response Booklets (25) .......... $62.00
**EVA526005** DAB-4 Audio CD ................................................. $29.00
**EVA526006** DAB-4 Assessment Probes for Comprehension, Thought Processes, & Learning Potential ......................... $52.00

**EVA052601** Complete TEWL-3 Kit ........................................... $289.00
**EVA052602** TEWL-3 Manual ................................................ $79.00
**EVA052603** TEWL-3 Profile/Record Booklets Form A (10) .... $37.00
**EVA052604** TEWL-3 Profile/Record Booklets Form B (10) .... $37.00
**EVA052605** TEWL-3 Student Workbooks Form A (10) ....... $69.00
**EVA052606** TEWL-3 Student Workbooks Form B (10) ....... $69.00
**EVA052607** TEWL-3 Picture Cards ........................................... $26.00

**EVA052611** Complete TWS-5 Kit ........................................... $132.00
**EVA052612** TWS-5 Answer & Record Form (50) ............... $54.00
**EVA052613** TWS-5 Examiner’s Manual ................................ $67.00
**EVA052614** TWS-5 Stimulus Word Cards ................................ $12.00

**EVA526000** Complete DAB-4 Kit ........................................... $391.00
**EVA526001** DAB-4 Manual ................................................ $104.00
**EVA526002** DAB-4 Student Booklet ..................................... $69.00
**EVA526003** DAB-4 Profile/Examiner Record Booklets (25) ..... $77.00
**EVA526004** DAB-4 Student Response Booklets (25) .......... $62.00
**EVA526005** DAB-4 Audio CD ................................................. $29.00
**EVA526006** DAB-4 Assessment Probes for Comprehension, Thought Processes, & Learning Potential ......................... $52.00
Test of Orthographic Competence (TOC)
The Test of Orthographic Competence (TOC) assesses aspects of the English writing system that are integral to proficient reading and writing. These aspects include letters, spelling, punctuation, abbreviations, and special symbols. It has three age-related forms (6-7 years, 8-12 years, and 13-17 years). Normed on a national representative sample of 1,477 individuals, it yields standard scores and percentiles for both subtests and composites. Classroom teachers, special education teachers, reading specialists, school psychologists, speech pathologists, or any other professionals with some training in standardized test administration can use the TOC.


EVA5260 Complete TOC Kit ........................................... $321.00
EVA5262 TOC Examiner’s Manual ................................... $56.00
EVA5263 TOC Picture Book ............................................. $63.00
EVA5261 TOC Examiner Record Forms (Ages 6-7) (25) ........ $32.00
EVA5265 TOC Student Response Booklets (Ages 6-7) (25) .... $56.00
EVA5266 TOC Student Response Booklets (Ages 8-12) (25) ... $63.00
EVA5264 TOC Student Response Booklets (Ages 13-17) (25) ... $63.00

Gray Oral Reading Tests—Fifth Edition (GORT-5)
The fifth edition of this enduring test quickly identifies students with oral reading difficulties. The GORT-5 offers updated norms, an expanded age range, revised comprehension questions, and streamlined basal and ceiling rules that make administration easier and more efficient.

The test includes two equivalent forms, both of which contain 16 developmentally sequenced reading passages. The student reads these passages aloud and answers five questions about each one. The examiner records the student’s reading rate, deviations from the printed passages, and miscues. The Manual provides clear scoring guidelines and a system for analyzing miscues in four areas: Meaning Similarity, Function Similarity, Graphic/Phonemic Similarity, and Self-Correction. This miscue analysis system is helpful in designing interventions tailored to each student’s needs.

Free of gender and ethnic bias, the GORT-5 is widely used to identify students with poor oral reading proficiency, to pinpoint specific strengths and weaknesses, and to document reading progress in response to intervention.

COMPLETE KIT INCLUDES: Examiner’s Manual, Student Book, and 25 Examiner Record Booklets each for Forms A and B, all in a sturdy storage box.

EVA52671 Complete GORT-5 Kit ........................................... $289.00
EVA52672 GORT-5 Examiner Record Booklet (Form A) (25) .... $62.00
EVA52673 GORT-5 Examiner Record Booklet (Form B) (25) .... $62.00
EVA52674 GORT-5 Examiner’s Manual ............................... $97.00
EVA52675 GORT-5 Student Book ....................................... $89.00

Decoding-Encoding Screener for Dyslexia (DESD)
The Decoding-Encoding Screener for Dyslexia (DESD) is a screening test that allows you to assess a student’s specific reading difficulties in less than 10 minutes. The DESD consists of three sections: Decoding, Encoding, and Letter Writing. The Decoding section provides a norm-referenced measure of sight-word recognition (Reading Standard Score). Additionally, qualitative indicators in the Encoding section allow you to distinguish deficits in sight-word recognition from deficits in phonetic analysis. The test identifies the specific skills that a child brings to bear on the task of reading words.

The DESD allows identification of children who are at risk for dyslexia, so they can be referred without delay to special services. The early screening and intervention made possible by the DESD vastly improves the effectiveness of educational therapy and helps minimize the secondary emotional problems dyslexia can create. Standardized on a sample of 678 students in grades 1 through 8, the DESD can be administered and scored in 5 to 10 minutes.

COMPLETE KIT INCLUDES: Stimulus Booklet; 100 Spelling Response Forms; 100 Record Sheets; Manual

For a more detailed description of these evaluations, please visit our website: www.therapro.com
Test of Silent Contextual Reading Fluency—2nd Edition (TOSCRF-2)

The TOSCRF-2 is a measure of reading comprehension and general reading ability that can be administered to individuals or groups in a brief period of time, is cost-effective, and is reliable and valid.

The TOSCRF-2 is a companion to the Test of Silent Word Reading Fluency—Second Edition (TOSWRF-2). The TOSCRF-2 measures a student’s essential contextual reading abilities (i.e., word identification, word meaning, word building, sentence structure, comprehension, and fluency).

The TOSCRF-2 is a quick and accurate method of assessing the silent general reading ability of students ranging in age from 7 years 0 months to 24 years 11 months. It has a test manual and four equivalent forms (A, B, C, D). The TOSCRF-2 was normed using a national representative sample of 2,375 individuals, residing in 29 states. It yields raw scores, standard scores, percentiles, and age and grade equivalents. Classroom teachers, special education teachers, reading specialists, school psychologists, speech pathologists, or any other professionals with some training in standardized test administration can use the TOSCRF-2.


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The Slosson Oral Reading Test—Revise 3 (SORT-R3)

The Slosson Oral Reading Test (SORT) has historically held a respected position in education as a quick screening test to determine a student’s reading level. The SORT-R3 continues in the tradition and purpose that Richard L. Slosson intended, remaining as a quick and reliable screening test. With the ability to target word recognition levels for children and adults, the SORT-R3 can be used for regular education testing populations and for many special testing populations.

Developed from several sources, such as Dolch and other reading references, the SORT-R3 word lists contain 200 words in groups of 20 words. Target words have been carefully selected to represent a steady progression of difficulty from preprimer through the high school level. The design and layout of this test allows for quick individual administration, taking about 3-5 minutes on average to complete.

With the Slosson Oral Reading Test—Revise 3 being a multidimensional reading assessment tool, and only taking 3 to 5 minutes to administer, it easily stands out as a unique test.
Adaptive Behavior Diagnostic Scale (ABDS)

The Adaptive Behavior Diagnostic Scale (ABDS) is an interview-based rating scale that assesses the adaptive behavior of individuals between the ages of 2 through 21 years. The primary function of the ABDS is to establish the presence and the magnitude of adaptive behavior deficits. The ABDS scores are compatible with state and federal special education classification systems and consistent with the DSM-V and American Association on Intellectual and Developmental Disorders (AAIDD) definitions of intellectual disability. The ABDS may be used to assess the adaptive behavior of individuals with or suspected of having intellectual disability, autism spectrum disorder, learning disabilities, mental or behavioral health condition or other similar concerns.

The test yields reliable and valid scores for three adaptive behavior domains (Conceptual, Social, Practical), composed of 50 items each. Specific skill areas are measured in the three domains.

DO-EAT: Performance-based assessment tool for children

The Do-Eat Assessment is a reliable and valid assessment that was developed to evaluate the areas of strength and difficulty in activities of daily living and instrumental activities of daily living among children with a variety of disorders, such as developmental coordination disorder, attention deficit hyperactivity disorder, non-verbal learning disabilities and learning disabilities. The Do-Eat is suitable for children with either a chronological or behavioral age of five to eight years.

The Do-Eat is composed of three related activities, performed one after the other, similar to sequences required in daily life. Each activity is designed according to a sequence of tasks required to perform the overall activity. The observation and the scoring are performed on two dimensions: observation and analysis of the tasks required for each activity, and a parallel observation and analysis of the performance skills (sensory-motor, executive functions and behavioral and emotional measures). The information gathered can be used to define therapeutic goals, for meaningful intervention that takes the child’s level of functioning in his or her natural environment into account.

Goal-Oriented Assessment of Lifeskills (GOAL)

The Goal-Oriented Assessment of Lifeskills (GOAL) is an innovative new evaluation of functional motor abilities needed for daily living. Designed for children 7 to 17, the GOAL consists of seven Activities, fun and motivating tasks based on real occupations of a child’s daily life. Each Activity is linked to Intervention Targets that help you turn assessment results into a specific, goal-oriented treatment plan. This standardized, psychometrically precise instrument offers an ecologically valid description of a child’s competencies and opportunities for growth in both fine and gross motor domains.

The GOAL can help determine eligibility for special services and inform planning of occupational and/or physical therapy and adaptive physical education. It’s useful in a variety of settings, including schools, clinics, hospitals, and private practice. Although intended primarily for occupational therapists, it can be used by other professionals, including psychologists, physical therapists, and other childhood intervention specialists.

This individually administered assessment, the child performs seven Activities representing a range of functional tasks. Dr. A. Jean Ayres’ sensory integration theory describes many of the key concepts underlying the GOAL Activities. This theory proposes that processing of sensory inputs provides a foundation for development of cognitive and motor skills.

The GOAL scores are based on 54 Steps - small units of easily observable, functional behavior within the seven Activities. These are scored based on three elements of successful functional performance: accuracy, independence, and speed. Using the Record Form, each Step is scored pass or fail; then the Step scores are summed to yield the Fine Motor and Gross Motor Standard Scores, as well as the Progress Score.

COMPLETE KIT INCLUDES: 1 Set of Test Materials; 25 Record Forms; Pad of 25 Paper Box Sheets; Stimulus Easel; and Manual.

For a more detailed description of these evaluations, please visit our website: www.therapro.com
### Goniometers

Goniometers measure the range of motion of wrists, digits and larger joints for limb centering and alignment.

The Finger Gonometer (A) is 6” clear plastic, measures 0° to 180° and is marked in 5° increments. Linear measurements are in inches.

The 180 Degree Gonometer (B) is stainless steel. The 7” model has one 180° scale marked in 5° increments. The 14” model has two 180° scales marked in 1° increments. Linear measurements are in inches and centimeters.

The International Gonometers (C) measure large joints. The 180° model provides linear measurements up to 7 7/8” and is marked in 5° increments. The 360° goniometer provides linear measurements up to 12 1/4” and is marked in 1° increments. Linear measurements are in inches and centimeters.

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### The R-FVII:2

The newly revised R-FVII:2 measures the vocational interests of special populations. It uses pictures of individuals engaged in different occupations to measure the vocational likes and dislikes of students and adults who are intellectually disabled, learning disabled, adult disadvantaged, or enrolled in alternative or vocational/career training programs. No reading or writing is required.

The R-FVII:2 is easy to administer and score. It can be administered in about 20 minutes to groups or individuals. It is self-administered and has no time limits. Consisting of a series of 55 sets of three drawings, each depicting different job tasks, the R-FVII:2 explores a wide range of jobs at the unskilled, semi-skilled, and skilled levels.

The R-FVII:2 complies with Title IX (prohibiting sex discrimination in education) by using a single Inventory Booklet for both men and women; both genders respond to the same illustrated job tasks in each of the occupational categories.

**COMPLETE KIT INCLUDES:** Manual, 20 Test Booklets, and Occupational Title Lists.

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### Goniometers

- **Finger Gonometer (A):** 6” clear plastic, measures 0° to 180°, marked in 5° increments. Linear measurements are in inches.
- **180 Degree Gonometer (B):** Stainless steel, 7” and 14” models, marked in 5° and 1° increments. Linear measurements are in inches and centimeters.
- **International Gonometers (C):** 180° and 360° models, measure large joints, marked in 1° increments. Linear measurements are in inches and centimeters.

### Reading-Free Vocational Interest Inventory: 2 (R-FI:2)

The newly revised R-FI:2 measures the vocational interests of special populations. It uses pictures of individuals engaged in different occupations to measure the vocational likes and dislikes of students and adults who are intellectually disabled, learning disabled, adult disadvantaged, or enrolled in alternative or vocational/career training programs. No reading or writing is required.

The R-FI:2 is easy to administer and score. It can be administered in about 20 minutes to groups or individuals. It is self-administered and has no time limits. Consisting of a series of 55 sets of three drawings, each depicting different job tasks, the R-FI:2 explores a wide range of jobs at the unskilled, semi-skilled, and skilled levels.

The R-FI:2 complies with Title IX (prohibiting sex discrimination in education) by using a single Inventory Booklet for both men and women; both genders respond to the same illustrated job tasks in each of the occupational categories.

**COMPLETE KIT INCLUDES:** Manual, 20 Test Booklets, and Occupational Title Lists.

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### Transition Planning Inventory—2nd Edition (TPI-2)

Provides school personnel with a systematic way to address critical transition planning areas that are mandated by the Individuals With Disabilities Education Act of 2004 and to account for individual students preferences, interests, strengths, and needs. Key information is gathered from students, parents, guardians, and school personnel through the use of rating scales and open-ended questions.


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### TEACCH Transition Assessment Profile—2nd Edition (TTAP)

TEACCH Transition Assessment Profile—Second Edition is a newly titled and improved revision of the Adolescent and Adult Psychosocial Profile (AAPP). This comprehensive test was developed for adolescents and older children with autism spectrum disorders, particularly those with transitional needs. The TTAP is structured to satisfy those provisions in the Individuals with Disabilities Education Act (IDEA) of 1997, which require adolescents to be evaluated and provided with a transition plan by age 14.

Educators, parents, counselors, and care providers can use this powerful tool to assist individuals with autism spectrum disorders to prepare for a successful, semi-independent adult life (i.e., personal development, recreational living, adult integration into employment and residential arrangements, etc.). The TTAP will also help providers identify the individual’s principle transition goals, strengths and weaknesses.

**COMPLETE KIT INCLUDES:** Examiner’s Manual, 10 Profile/Scoring Forms.

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For questions or more information, please contact our Customer Service Department at 800-257-5376 or 508-872-9494. Our office is open Monday thru Friday from 9:00 AM to 5:00 PM E.S.T.

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