Reports and Data Analysis

Test Interpretation Guidelines

The IVA-2 test results can be interpreted and used by examiners as part of a comprehensive clinical evaluation. In this way the test provides relevant test data that can be used to help support or refute any clinical diagnosis that the examiner is considering. It can also serve as an aid in helping guide the clinician in determining possible therapeutic intervention strategies. The various sub-scales provide data to help clarify the nature of problems with inhibition, consistency of response, stamina, inattention, variability of attention, and overall speed of discriminatory reaction time. In addition, a simple sensory/motor reaction time screening sub-test is built into the IVA-2 to help the examiner in identify possible neurological or learning problems or symptoms of other psychiatric disorders (e.g., depression) which can lead to slow reaction time. The test and ADHD questionnaire results can be used to create ten different types of interpretive reports. These reports are referred to as the Clinical, Standard, Detailed, Comprehensive, Sustained Attention, Comparative, Sensory Modality, High/Low Demand, Sensory Modality, and Rating Scale Report. These interpretive reports are primarily based on the data presented in their corresponding data analysis.
For these reports, you will need to apply a report credit to the test unless you have an unlimited report license. Only one report credit needs to be applied to be able to access all ten different reports for any test session. The IVA-2 reports can incorporate the rating scale data to help examiners in their interpretation and differentiation of the three different ADHD presentations.

The box labeled **Clinical Interpretation & Rating Scale Data** has to be checked in order to incorporate the rating scale scores. Either the Parent/Teacher rating scales or the Self rating scales can be included in an interpretive report, but not both. An individual must be 17 years of age or older to complete the Self rating scales. In the rare cases when both Parent/Teacher and Self rating scales are completed for an individual, it will require clinical judgment to reconcile any differences. In these cases, it is recommended that the clinician generate separate reports for the Parent/Teacher and Self rating scales. The clinicians will then need to review the different rating scale answers for each one in formulating a clinical interpretation.

For a concise, graphic review of test results, the Standard Scale Analysis can be used. The data in the Standard Scale analysis are interpreted in the Standard Report. Results from two different tests can be compared using the Comparative Report with the data from both tests presented in table format in the Comparative Analysis. The IVA-2 Clinical Report provides clinicians with a way to integrate an extensive amount of clinical data into a draft report. To prepare this report, the IVA-2 test requires that the clinician answer a series of relevant key questions necessary to confirming or refuting a diagnosis of ADHD. The Rating Scale report provides a short written summary of the ADHD symptoms identified by the rating scales completed along with suggestions for ite

interpretation based solely on the rating scale data. The rating scale data are also summarized in table format, and each rater's responses are listed.

All of the additional reports help the clinician achieve a more in-depth analysis and understanding of the unique attentional strengths and weaknesses of each client. All report documents are generated in an IVA-2 word processor and can be saved in a .docx format which is compatible for use with Microsoft Word 2010 version or higher. The reports can also be saved in a Rich Text Format (.RTF) so that they can be further edited by other word processing programs. For full compatibility and formatting purposes, BrainTrain recommends saving reports as Word documents. The analysis documents can be saved as a Rich Text Format (.RTF) or as a PDF. The Rich Text Format is compatible for use with Microsoft Word 2010 version or higher. The PDF can be imported into Microsoft Word 2010 or higher.