A psychological report is a report that a psychologist writes to summarize services provided to a client. Often these reports present the results of an evaluation and will name what evaluation tests and procedures were used, present the results of those tests, procedures, and any observations, and give specific intervention and service recommendations to address the reasons for the request for evaluation.

This handout describes the basic components of typical psychological reports used by school personnel to provide support to students. By developing a better understanding of how the psychologist evaluates and reports a student’s cognitive, academic, and social-emotional functioning, parents and teachers can make informed decisions regarding the most appropriate interventions and educational services for the child.

Components of a Psychological Report

There are several basic parts of a psychological report: reasons for referral, the procedures used, background information, behavioral observations, test results, interpretations/conclusions, and recommendations. Although different psychologists may use different approaches to organizing and reporting information, most psychological evaluation reports will include these components.

The reason for referral. This is typically the first section and contains the reasons why the child is being referred for evaluation. In most instances the teacher or the parent or both will have requested the evaluation, so what they say will be very important. It is this information that will be used to determine what tests and other procedures will need to be included in the evaluation. So, the more detailed and useful the referral information, the more effective and useful the conclusions and interventions will be. For example, a vague and not very useful referral concern might be, “Jason has trouble learning to read.” A more useful referral will include more details, such as, “Jason has trouble sounding out new words and remembering sight words. These difficulties seem to hinder his ability to read a passage with fluency as well as gain meaningful information from the passage.”

Assessment procedures. This section provides a brief description of the evaluation process. Often this is in the form of a list of procedures. It usually begins with the dates on which the psychologist interviewed the parents and teachers and then lists the names of tests that were administered, the names or types of additional procedures such as observations or rating scales, and the date of a final meeting to discuss the results of the evaluation.

Background information. This section provides a brief history of the child’s academic, cognitive, physical, and social development, as well as a brief medical history, and is obtained typically through interviews with the child, the parents, and the teachers, and through a review of any school and relevant health records. This information provides an historical backdrop that often proves useful in interpreting a child’s performance, both in school and on certain tests. For example, the psychologist’s interpretation of low performance on tests of receptive language (listening skills) will be different for a child with a history of chronic ear infections than for a child with no history of chronic ear infections. If, in the background information section, there is a reference to previous evaluations of the child, then current findings can be compared with earlier results to determine trends or patterns in the child’s learning or behavior.

Behavioral observations. School psychologists often attempt to observe a child in a variety of environments, including the classroom and the actual testing session. These observations are summarized in the psychological report. Typically, a description of specific behaviors that may have had a positive or negative impact on the child’s academic, social, or emotional development, or performance during the evaluation, are highlighted. Behavioral observations during the assessment provide
information necessary to make accurate interpretations of a child’s performance on psychological tests. For example, a child who approaches tasks methodically and who concentrates on neatness and precision over speed may perform poorly on tasks that require fast solutions as well as accuracy. An astute psychologist will attribute a low score on such tasks to the child’s methodical test-taking approach rather than to poor problem-solving ability.

**Test results.** This section is often the longest part of the psychological report. It provides a summary (or description) of the findings from all the formal evaluation tests. Some school psychologists include a table in their report that lists the names and scores. Test scores generally provide an indication of how the child performed in a particular skill or ability area (for example, Math Calculation Skills, Verbal Ability) compared to other children of the same age. The report should summarize test results in a manner that is meaningful and relevant to the teacher and parent, by, for instance, providing the range in which the child’s scores fall when compared to same-age students. For information about the meaning of different types of test scores, see the “Resources” section at the end of this handout.

**Interpretations and conclusions.** This section includes a clear explanation of the results of the complete assessment and answers questions posed at the time of the referral. Connections will be made between the child’s educational history and/or medical history and the child’s current functioning in various areas (for instance, cognitive, academic, behavioral, and social/emotional). The psychologist will use these connections, and an understanding of where the child performs in a variety of psychological areas relative to same-age peers, to draw conclusions about the key cause of the child’s problems. The psychologist will also address any factors that influence the accuracy or reliability of the assessment, such as the child’s health, attention during testing, difficulties with the English language, or cultural differences.

**Recommendations.** In this section, specific suggestions are offered regarding programs, strategies, and interventions that may prove most helpful in remediating (or correcting) the child’s difficulties. In many instances, the psychologist and other professionals who were involved in interpreting the child’s test results will meet with the child’s teachers and parents before making recommendations. Feedback and comments are often critical to the development of recommendations that will be most beneficial to the child. If the psychologist’s evaluation was part of a team evaluation for special education services, additional reports will be gathered from the members of the team who conducted assessments, and the full team will meet with the parents to discuss the student’s eligibility for special education. These separate reports might then be put together into a comprehensive report of the full special education evaluation, including the team’s determination of eligibility.

**Issues to Consider**

- If you want to know more about the tests that were given to the child, then ask the school psychologist and other professionals who conducted the evaluation.
- If certain information was not included in the child’s psychological report, such as standard scores or percentiles, you may request this information from the psychologist who conducted the evaluation.
- If you were not interviewed regarding the child’s problems, you may want to ask the school psychologist to talk with you, because parents and teachers may be able to provide valuable information.
- For parents, if you disagree with the findings of your child’s psychological evaluation, you may have several options depending on the nature of the evaluation and policies in your state: Most simply, you may request a review of the assessment with the psychologist and other school personnel involved and attempt to resolve your concerns. Sometimes miscommunication leads to disagreement. If you disagree with the findings, you may provide an alternative or dissenting opinion to be included in your child’s due process file. If you obtain an independent evaluation of your child, you may request that those results be included in the due process file and considered as part of the planning for your child. You may request—at district expense—an independent evaluation of your child. While you have the right to request an independent evaluation, the district may disagree and request a hearing. A hearing officer, however, may order the evaluation at district expense.
- No single test of intelligence, achievement, or personality, or behavior rating scale, provides sufficient information for making a diagnosis (learning disability, speech/language impairment, attention deficit disorder). A diagnosis of a psychological disorder or educational disability is only valid when multiple data sources demonstrate a pattern of performance that is consistent with the condition (or with criteria in law in the case of an
educational disability). In other words, the psychological report must show consistent and compelling evidence from different tests and methods of gathering information (interviews, work samples) that support diagnostic conclusions.

Summary
In general, a psychological report provides a complete explanation of the reason for the evaluation, the procedures and measures used, and the results. The report also includes an interpretation of the findings as well as the psychologist’s conclusions and diagnostic impressions. The psychological report generally ends with recommendations that translate the evaluation findings into strategies and interventions to support the child.

Resources


Websites
PACER (Parent Advocacy Coalition for Education Rights)—www.pacer.org
Wrightslaw—www.wrightslaw.com

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