

PSYCHOLOGICAL ASSESSMENT

Name: [REDACTED]

Date: January 13th, 1978

No: [REDACTED]

Birth Date: September 8, 1961  
 Education:

A.A.M.D. Level: Profound

TESTS		TEST RESULTS					Other
		C.A.	M.A.	I. Q.			
				Verb.	Perf.	Full	
Kuhlmann		16-4	1-6				
Vineland		16-4	2-1 (\$A.)				
<i>Previous Tests</i>	<i>Date</i>						<i>Special Conditions</i>
Kuhlmann	03/09/75	14-0	1-4				
Vineland	03/09/75	14-0	2-5 (\$A.)				
Kuhlmann	06/02/74	12-5	1-4				

REFERRAL INFORMATION:

[REDACTED] is a 16 year old resident of T.V. 7. Diagnosis at the time of his admission to H.R.C. in December, 1973 was stated as mental retardation due to hereditary biological conditions with autistic features.

He was last assessed in September, 1975 at which time he was reported to be functioning within the severe range of mental retardation. The present assessment was conducted for his annual review.

DISCUSSION OF CONCLUSIONS:

[REDACTED] appeared to be shy in the testing situation. He made little eye contact and frequently hid his face with his arm. He liked to handle the available materials but exhibited a short attention span for purposive behaviour. He demonstrated some autistic behaviours such as smelling the presented objects and manipulating them in his hand. He initiated some activities by taking the examiner's hand to get an object. He did this with the crayon and blocks. He held the crayon immaturely when he marked with it. He was unable to imitate a circle unless his hand was held. When given the co-ordination board he turned it upside down to remove the shapes. He replaced three correctly when they were handed to him but then refused to proceed further. He would not attempt to build a block tower or assemble the stacking cups even after demonstration. Only sounds were heard during the assessment period.

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As assessed on the Kuhlmann Test and the Vineland Social Maturity Scale, [redacted] is functioning within the profound range of mental retardation. He can dress himself except for tying, buttons and zippers. He attempts to brush his teeth but loses interest quickly. He demonstrates little interest in washing. He is toilet trained except for the occasional wet accident at night. He does not interact with the other residents.

There has been little change since his previous assessment in September, 1975.

RECOMMENDATIONS:

1. Assess for enrolment in an O.T. programme. This would give him opportunities to play more purposefully with objects and also strengthen his attention span.
2. Continue present programmes to help him gain more independence in his basic self care skills.

COPIES: Resident Records  
Ward File (T.V. 7)

[redacted]

Psychometrist,  
Service Area C

/mc

[redacted]