



Psychiatric &
Psychological
Specialties

Comprehensive mental health services.

Request For Neuropsychological Consultation

Christopher Contardo, Ph.D., ABPP: Clinical Neuropsychologist

Name of Patient _____ Date _____

Date of Birth (M/D/Y) _____ Phone Number _____

Does someone else need to be contacted to schedule appointment? Yes No

Name _____ Relationship _____ Phone _____

Referring Provider _____ Phone _____

Reason for Referral _____

Assessment, Diagnosis and Recommendations

- Vascular Disease/Dementia
- Alzheimer's Disease/Mild Cognitive Impairment/Dementia
- Psychological Impact on Memory
- Other Neurodegenerative/Dementia Condition Suspected: _____
- Epilepsy/ Non-epileptic Events
- Traumatic Brain Injury/Concussion (return to play decisions)
- CVA/TIA – Family Education, Cognitive Prognosis
- Language (APHASIA)
- Pre/post Neurosurgery: Predictions or Assessment of Impact on Functioning
- Delirium/Encephalopathy Assessment and Recommendations
- Other: _____

Competency Evaluations

- Driving
- Independent Living
- Return to Work

Academic Diagnoses and School Accommodations

- ADHD
- Learning Disability

General Psychological Functioning and Diagnosis

- Diagnose and Evaluate for Treatment

Surgical Evaluation

- Pre or Post Neurosurgery (Tumor, Neuro-intervention)
- Bariatric Surgery
- Other _____