

Neurocognitive Testing & Assessment Procedure Requisition

Clinic Name
Address, City, State Zip
Phone: - Fax:

Patient: _____ Patient ID: _____

DOB: _____ DOS: _____ Complaint / Reason: _____

Clinician: _____ Tech: _____ Total Time: _____

Neurocognitive Test Selection

Check the Cognitive Tests to be administered

Verbal Memory Test

Visual Memory Test

Finger Tapping Test

Symbol Digit Coding Test

Stroop Test

Shifting Attention Test

Continuous Performance Test

Perception of Emotion Test

Non-Verbal Reasoning Test

4 Part Continuous Performance Test

Other Testing: (Conventional Paper & Pencil)

Clinical and Quality Rating Scales:

Billing Code: 96127 & MIPS (Medicare Quality Measures)

Check Scales to be administered

Quality of Life Outcomes

Medical Outcomes Survey (MOS) SF-36

Depression & Anxiety

DASS Depression, Anxiety and Stress Scale SF-21

DASS Depression, Anxiety and Stress Scale LF-42

PHQ-9 Patient Health Questionnaire SF-9

GAD-7 Generalized Anxiety Disorder SF-7

Stanford Geriatric Depression Scale (SGDS) SF-15

Stanford Geriatric Depression Scale (SGDS) LF-30

Sleep, Fatigue

Epworth Sleepiness Scale (ESS) SF-8

Pittsburgh Sleep Quality Index (PSQI) SF-10

Sedation Scale (SS) SF-1

Alertness Rating Scale (ARS) SF-1

Modified Fatigue Impact Scale (MFIS) SF-21

ADHD, Neurobehavioral, NeuroPsych

Adult ADHD Self-Report Scale (ASRS-v1.1)

Neurobehavioral Symptom Inventory (NSI) SF-22

NeuroPsych Questionnaire (NPQS) SF-45

NeuroPsych Questionnaire (NPQ) LF-207

Pain, Substance Use Disorder

Numeric Pain Scale SF-1

Pain Catastrophizing Scale (PCS) SF-13

Drug Use Questionnaire (DAST) SF-20

Alcohol Use Disorders (AUDIT) SF-10

} SBIRT Scales

Falls, Functional, Disability

Falls Risk Scale SF-13

Health Assessment Questionnaire (HAQ-8) Disability Scale

LF = Long Form, SF = Short Form and the number is the number of questions.

TBI, Concussion, Vestibular

Neurobehavioral Symptom Inventory (NSI) SF-22 (Vestibular, Cognitive, Affective, Somatic, Hearing symptoms)

Dizziness Handicap Inventory (DHI) SF-25

Head Injury Questionnaire (HIQ) LF-90

PTSD

PTSD Checklist DSM-5 (PCL-5) SF-20

Life Events Checklist for DSM-5 (LEC-5)

PTSD Checklist - Civilian (PCL-C17)

PTSD Checklist - Stressor Specific (PCL-S17)

Life Events Checklist (LEC) SF-17

Combat Exposure Scale (CES) SF-7

DRRI-Deployment Risk and Resilience Inventory (11 Rating Scales)

Other Scales

Zung Depression Scale (ZSDS) SF-20

Zung Anxiety Scale (ZSAS) SF-20

Memory Questionnaire (MEMQ) SF-27

Adult Obsessive-Compulsive Disorder Inventory SF-20

MHE Questionnaire (Mild Hepatic Encephalopathy) SF-12

Life Habits Checklist SF-20

Pediatric & Adolescent

Vanderbilt ADHD Parent Scale LF-53

Vanderbilt ADHD Teacher Scale LF-43

Vanderbilt ADHD Follow-up Parent SF-38

Vanderbilt ADHD Follow-up Teacher LF-43

Screen for Child Anxiety Related Disorders (SCARED) Child LF-41

Screen for Child Anxiety Related Disorders (SCARED) Parent LF-41

Child Obsessive-Compulsive Disorder Inventory SF-20

Social Anxiety Scale for Children and SF-20

Pediatric Symptom Checklist (PSC) SF-35

Pediatric Symptom Checklist-Youth Report (Y-PSC) SF-35

Pediatric Symptom Checklist (PSC-17) SF-17

Childhood Cancer Neurocognitive Questionnaire SF-25

NeuroPsych Questionnaire (NPQ SF-45)

NeuroPsych Questionnaire (NPQ LF-207)

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DRRI - Deployment Risk and Resilience

Inventory (11 Rating Scales)

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Billing Codes:

Check the codes

Test Administration

96136 Clinician

+96137 Clinician

96138 Technician

+96139 Technician

Test Evaluation & Feedback

96130 Psych

+96131 Psych

96132 Medical

+96133 Medical

Cog Impair Assess & Care

99483 E & M

<https://www.cms.gov/cognitive>

Brief Behavioral Scales

96127

Total Number:

Neuro Behav Status Exam

96116 Medical

+96121 Medical

Developmental

96112

+96113

Speech Path and Occ Med

96125

Psych & Behavior

90791

90792

96516

SBIRT (Substance Abuse)

99408 Commercial

99409

G0396 Medicare

G0397

H0049 Medicaid

H0050



If you would like a PowerPoint Document Version of this Request Form to customize for your clinic / practice, contact us at support@cnsvs.com and enter in the subject line... REQUEST: CNS VS Testing Requisition.

Thanks,

Your CNS Vital Signs Support Team