
ATRITM

Neuropsychological Report Template

STRUCTURED CLINICAL DOCUMENTATION
FOR AUTISM ASSESSMENT



PROFESSIONAL • CLINICAL • EVIDENCE-BASED

ATRI METHODTM
PROTOCOL & DOCUMENTATION SYSTEM

REPORT STRUCTURE

Structure of the Neuropsychological Report

This template is organized into 6 sections to guide a comprehensive and standardized clinical documentation process.



01

Identification

Patient and professional identification and assessment details.



02

Reason for Referral

Main concern, referral source and objectives of the assessment.



03

Clinical History

Developmental, medical, school and family background.



04

Assessment Tools

Instruments, scales and procedures used in the evaluation.



05

Results

Clinical observations, findings, analysis and interpretation.



06

Conclusion & Recommendations

Diagnostic impression, clinical rationale and recommendations.



Each section is designed to ensure clarity, consistency and adherence to professional and ethical standards.

ATRI METHOD™

PROTOCOL & DOCUMENTATION SYSTEM

SECTIONS 1-2

Identification & Reason for Referral

SECTION 01 IDENTIFICATION

Patient Name: _____

Professional Name: _____

Date of Birth: _____

Professional Role: _____

Age: _____

License / Registration: _____

Gender: _____

Date of Assessment: _____

School / Institution: _____

Place of Assessment: _____

SECTION 02 REASON FOR REFERRAL

Referral Source: _____

Main Concern / Chief Complaint: _____

Assessment Objectives: _____

Specific Questions to be Addressed (if any): _____



SECTIONS 3-4

Clinical History & Development Assessment Tools

SECTION 03 CLINICAL HISTORY & DEVELOPMENT



Pregnancy &
Birth History



Developmental
History



Educational /
School History



Family & Social
History

SECTION 04 ASSESSMENT TOOLS

Instrument / Tool	Domain Assessed	ATRI Stage*	Date Administered

* ATRI Stages: 0 – 1 – 2 – 3 – 4 | Note: Add additional pages if more space is needed.



SECTION 05

Assessment Results

5.1 CLINICAL OBSERVATIONS



Behavior during assessment, effort, attention, mood, cooperation and other relevant observations.

5.2 QUANTITATIVE FINDINGS



Summary of quantitative results and relevant scores obtained in the instruments used.

5.3 QUALITATIVE FINDINGS



Qualitative analysis of performance patterns, strengths, weaknesses and behavioral observations.

5.4 INTEGRATION OF RESULTS



Integration of quantitative and qualitative findings in the context of developmental history and clinical data.

SECTION 06

Conclusion & Recommendations

6.1 DIAGNOSTIC IMPRESSION

Summary of the findings and the diagnostic impression based on the data collected.

6.2 CLINICAL RATIONALE

Clinical rationale supporting the diagnostic impression and interpretation of results.

6.3 TREATMENT RECOMMENDATIONS

Recommendations for intervention, accommodations, supports and follow-up.

6.4 SIGNATURE BLOCK

Professional Name: _____

License / Registration: _____

Professional Specialty: _____

Date of Report: _____

Location: _____

Professional Signature



This report was prepared based on the information available at the time of assessment. It is recommended that findings be interpreted in the context of ongoing clinical follow-up.