



PTION Schools, Inc.
Creating a Voice for Choice

OPTION Schools

Assessment Reference Guide

2010

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Acknowledgements

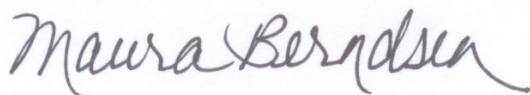
As providers of quality services for children and families impacted by hearing loss, we find ourselves blending art and science daily. A key element in this process is documentation, including the collection and analysis of anecdotal, criterion-referenced and standardized data. *OPTION Schools* has reflected in recent years on the challenges our schools face in this area and created the Data Collection Committee to address our concerns and priorities. The resulting work has provided *OPTION Schools* with:

- *Facts and Figures*, which captures key findings and messages related to the development of listening and spoken language for children who are deaf or hard of hearing;
- the LSLS- DR, a web-based secure data repository which will ultimately allow *OPTION Schools* to objectively describe aggregate outcomes for families involved in listening and spoken language education and allow individual schools to analyze data specific to their students and programs giving an invaluable tool for student and program planning; and now,
- the *Assessment Reference Guide* which provides critical information about specific tests and tools, can be used as a guide to schools to evaluate which tests are best to measure their students' progress.

The information for the *Assessment Reference Guide* was obtained from the *Mental Measurements Yearbook 2010*, individual test manuals, and publisher's websites. Julie Rosenthal and Adrian Taylor, graduate students at Vanderbilt University, School of Medicine, Department of Hearing and Speech Sciences compiled the information which was then reviewed by Andrea Osman at CID-Central Institute for the Deaf and Karen Kupper at The Moog Center for Deaf Education. The Editor was Tamala Bradham, Ph.D. at Mama Lere Hearing School at Vanderbilt and Chair, Data Committee at *OPTION Schools, Inc.* This project was made possible by a grant through *OPTION Schools, Inc.*

As each *OPTION* school accesses these important tools, we will progress toward our goals of being efficient, effective and accountable. As you utilize this and other *OPTION Schools* resources, know that we are here to support you! Thank you for your continued support of *OPTION Schools'* initiatives and your work in serving children, families and the professionals with whom you work.

Sincerely,



Maura Berndsen, MA, CED, LSLS Cert. AVT
Listen and Talk; Seattle, WA
OPTION Schools President, 2010-12

Adaptive Behavior

Developmental Assessment of Young Children (DAYC)

Author	Judith K. Voress and Taddy Maddox
Publisher	Pro-Ed, Inc. http://www.proedinc.com/customer/ProductView.aspx?ID=1536
Purpose	Measures different developmental abilities in young children; used to identify children with developmental deficits at a young age in order to facilitate early intervention
Age Range	Birth to 5;11
Time	10-20 minutes
Scores or Subtests	Subtests: Cognitive, Communication, Social-Emotional, Physical Development, Adaptive Behavior Scores: standard scores, percentile ranks, and age equivalents for each subtest; General Development Quotient (GDC)
Description	The DAYC is designed to assess cognitive skills, communication skills, social-emotional skills, physical development, and adaptive behavior. The examiner completes each subtest by observing the child, interviewing the parents or caregivers, or testing the child.
Reliability	Coefficient alphas for the DAYC subtests across age range intervals range from .91 to .97; coefficient alphas for the DAYC subtests for seven subgroups (European American, African American, Hispanic, Males, Females, At-Risk, and Disabled) range from .98 to .99; test-retest reliability for the DAYC in 2 studies was Cognitive: .85-.93, Communication: .86-.92, Social-Emotional: .89-.95, Physical Development: .89-.95, Adaptive Behavior: .85-.95, and Composite: .86-.94
Validity	Criterion-referenced validity, construct-validity, and content-description validity were evaluated. The group with identified disabilities scored approximately two standard deviations lower than the typically-developing group on each DAYC subtest; results of the t-tests indicate that these differences are large enough to be statistically significant
Norms	1,269 children representative of the nation as a whole including 7 percent who were determined to be "at risk" for a disability or having a disability; most frequently cited disabilities were learning disabilities, speech-language delays, and mental retardation
Who Can Give the Test	Those who have training in administering early childhood assessments; prior to administering the DAYC, examiners should consult local school policies and state regulations, especially in the case where the purpose is to diagnose disabling conditions or to qualify children for special programs
Strengths	Fairly easy to administer and score; examines different areas of development and separates each into a subtest so one can examine each area separately
Concerns	The Cognitive subtest includes many verbal items so it is not appropriate for very young deaf children who have limited verbal skills; GDQ may be deflated because the Cognitive score may be an underestimate of the child's learning potential

Vineland Adaptive Behavior Scales, 2nd Edition

Author	Sara S. Sparrow, Domenic V. Cicchetti, David A. Balla
Publisher	Pearson
Purpose	Designed as an adaptive behavior assessment system that measures self-sufficiency across the life-span
Age Range	Birth to 90
Time	20-65 minutes; 25-90 minutes for Expanded Interview Form
Scores or Subtests	4 subject domains are tested and scored: Communication, Daily Living Skills, Socialization, and Motor Skills
Description	The Vineland-II is an individually administered measure of adaptive behavior with several different rating and interview forms for respondents (parents, caregivers, and teachers) who are very familiar with the individual.
Reliability	Coefficient alphas for the Teacher Report Form and adjusted split-half Pearson correlations for the two other forms are consistently quite strong (mostly mid- to high .90s) for the Adaptive Behavior Composite. The one exception was the Survey Forms (Survey Interview Form and Parent/Caregiver Rating Form) for the ages 32-71, where scores tend to be the highest and therefore are less variable and reliable. The internal consistency reliability for the domain scores is also very good to excellent (mostly high .80s to mid- .90s), with the exception of the slightly lower reliability in the Motor Skills domain. The adjusted test-retest reliability coefficients for the Teacher Report Form (n = 135 students), Survey Forms (n = 414 respondents), and the Expanded Form (n = 220 respondents) are generally good to excellent for the Adaptive Behavior Composite (low .80s. to mid-.90s).
Validity	In terms of test structure, comparisons between the subdomain, domain, and Adaptive Behavior Composite scores on all forms indicate moderately high correlations, which support the strong influence of overall adaptive behavior on the individual domains and subdomains. Correlations between the subdomains within a domain tend to be slightly stronger than with subdomains across domains. However, overall modest subdomain clustering illustrates the interrelatedness of the adaptive behaviors across domains. Confirmatory factor analysis results on the Teacher Report Form and Survey Forms indicate that a three- to four-factor model fits the data reasonably well. The adjusted correlations between each of the three Vineland-II forms and the corresponding Vineland Adaptive Behavior Scale form are moderately high, most in the .80s and .90s. Correlations between the different forms of the Vineland-II with each other were also calculated. The relationship between the two forms completed by parents/guardians (Survey Form and Expanded Form) was moderate (.68 to .80 for the Adaptive Behavior Composite). Weaker correlations were found between the TRF and the Survey Form (.32 to .48 for Adaptive Behavior Composite). However, this pattern of relationship between the teacher and parent forms of the Vineland-II is very similar to the early Vineland ABS and likely reflects the fact that the respondents observe the students' behavior in significantly different environments. Correlations between the Vineland and other similar

	measures were variable, ranging from .19 to .95.
Norms	A nationally representative sample of individuals, from birth through age 90 (broken down into 20 age groups), comprised the standardization sample for the Survey Interview Form and Parent/Caregiver Rating Form (n = 3,695) and the Expanded Interview Form (n = 2,151). A relatively higher proportion of the norm sample was clustered at birth through age 5 (about 30% for the Survey Interview Form; over 40% for the Expanded Interview Form). The TRF was administered to 2,570 teachers and daycare providers (from a larger pool of over 19,000) for 15 age groups of children, ranging from age 3 to 17/18. In all versions of the Vineland-II, the samples were designed to be evenly split between males and females and to match the 2001 U.S. Census data in the areas of race/ethnicity, SES, geographic region, community size, and special education placement.
Who Can Give the Test	Professionals with a graduate degree and specific training in early childhood assessment and interpretation
Strengths	Long history of effective use in identifying individuals with adaptive behavior deficits and intervention planning
Concerns	Relatively weak inter-rater reliability; professionals who administer the Vineland should have training in semi-structured interview format

Vineland Social-Emotional Early Childhood Scales

Author	Sara S. Sparrow, David A. Balla, Dominic V. Cicchetti
Publisher	American Guidance Service, Inc.
Purpose	Designed to assess the social and emotional functioning of young children
Age Range	Birth to age 5;11
Time	15-25 minutes
Scores or Subtests	4 scores: Interpersonal Relationships, Play and Leisure Time, Coping Skills, Composite
Description	Administered as a structured oral interview. The Vineland SEEC Scales are a subset of items from the Socialization Domain of the Vineland Adaptive Behavior Scales, Expanded Form.
Reliability	Internal consistency levels are adequate, with median values of the Interpersonal Relationships, Play and Leisure Time, and Coping Skills Scales ranging from .80 to .87. The internal reliability coefficients of the Scale Composite, across six age groups, range from .89 to .97 with a median value of .93. Test-retest reliability coefficients are also reported following re-administration of the scale after a 2- to 4-week interval (mean interval of 17 days). Adequate stability is also well documented with the vast majority of the component scale and composite score test-retest correlations falling between .71 and .79. Only the Coping Skills scale, for the age group 0-6 to 2-1, yielded an unacceptable stability coefficient ($r = .54$). Test-retest reliability drops substantially when the interviewer is different.
Validity	See information re: validity of the Vineland ABS. No separate validity measurements were made for the Vineland SEEC alone.
Norms	See information re: Vineland ABS above. From the total sample, 1200 children were birth – 5-11 and 58% of these subjects aged 3-0 through 5-11 were enrolled in preschool or school programs, which matched Dept of Education data from 1982. Norms are provided at 1-month intervals from birth to age 2, and at 2-month intervals from age 2 through 5 years, 11 months.
Who Can Give the Test	Professionals with a graduate degree and specific training in early childhood assessment and interpretation
Strengths	Assesses the social and emotional behaviors of young children; standardization process was comprehensive; easy to administer and score; concurrent and predictive validity with other developmental scales is acceptable
Concerns	The norms for the Vineland SEEC are almost two decades old

Articulation

Arizona Articulation Proficiency Scale – 3

Author	Janet Barker Fudala
Publisher	Western Psychological Services, 2003
Purpose	Provides SLP's (or another examiner trained in phonetic transcription) with a quick measure to assess articulation proficiency in children; assesses consonant and vowel sounds
Age Range	1;6-18 years
Time	3 min. or less
Scores or Subtests	Optional assessment tasks: word reading administration, language screening task, and spontaneous speech task
Description	Looks at articulation in multiple contexts to effectively evaluate ability and stimulability of different sounds. There are 42 target words (mostly monosyllabic).
Reliability	Internal consistency: range alpha score .078-0.96, median 0.925; inter-rater reliability: mean reliability coefficient 0.82; intra-rater reliability: high accuracy rates in several studies over the last 30 years; test-retest reliability: median correlation 0.97
Validity	The Arizona 3 has high correlations with other articulation tests (Templin-Darley Screening and Diagnostic Tests of Articulation, Photo Articulation Test, and Goldman-Fristoe Test of Articulation).
Norms	Data is standardized on a nationally representative sample of over 5,500 children and teenagers. It is gender specific up to age six. The sample is representative of ethnicity, region, gender, and parental education.
Who Can Give the Test	Speech-language pathologist or another professional who is trained in phonetic transcription
Strengths	Easy and quick to administer; all major speech sounds assessed in less than 3 minutes; quantitative scoring rules
Concerns	Pictures are black line drawings, some old-fashioned and may be more difficult for examinees to identify

Goldman-Fristoe Test of Articulation – 2 (GFTA-2)

Author	Ronald Goldman, Macalynne Fristoe																																																
Publisher	American Guidance Service, Inc.																																																
Purpose	Provides SLP's (or another examiner trained in phonetic transcription) with a measure to assess articulation proficiency in children; assesses consonant sounds; can be used for diagnostic potential to determine the level of articulation difficulty; growth of articulation skills over time can also be monitored																																																
Age Range	2-21;11 years																																																
Time	5-15 minutes (Sounds-in-Words subtest)																																																
Scores or Subtests	Subtests: Sounds-in-Words, Sounds-in-Sentences, Stimulability (imitation of speech sounds)																																																
Description	Looks at articulation in multiple contexts to effectively evaluate ability and stimulability of different sounds. There are 77 target words.																																																
Reliability	Internal reliability for females: 0.96; Median reliability for males: 0.94; median test-retest reliability 0.98 for initial, medial, and final sounds; inter-rater reliability median percentages of agreement for initial, medial, and final sounds are 93, 90, 90 respectively.																																																
Validity	Content: 23 of 25 sounds recognized as Standard American English consonants were included on the test. Construct: Means and Standard Deviations for Standard Sample by Age: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th>Age</th> <th>N</th> <th>Mean</th> <th>SD</th> </tr> </thead> <tbody> <tr><td>2</td><td>200</td><td>36.2</td><td>16.1</td></tr> <tr><td>3</td><td>200</td><td>22.8</td><td>15.0</td></tr> <tr><td>4</td><td>250</td><td>14.3</td><td>12.9</td></tr> <tr><td>5</td><td>250</td><td>8.6</td><td>10.3</td></tr> <tr><td>6</td><td>250</td><td>5.9</td><td>8.3</td></tr> <tr><td>7</td><td>200</td><td>3.3</td><td>7.3</td></tr> <tr><td>8</td><td>200</td><td>2.4</td><td>5.5</td></tr> <tr><td>9-10</td><td>200</td><td>2.5</td><td>6.1</td></tr> <tr><td>11-12</td><td>200</td><td>1.2</td><td>3.8</td></tr> <tr><td>13-14</td><td>200</td><td>1.6</td><td>5.5</td></tr> <tr><td>15-21</td><td>200</td><td>0.8</td><td>4.0</td></tr> </tbody> </table>	Age	N	Mean	SD	2	200	36.2	16.1	3	200	22.8	15.0	4	250	14.3	12.9	5	250	8.6	10.3	6	250	5.9	8.3	7	200	3.3	7.3	8	200	2.4	5.5	9-10	200	2.5	6.1	11-12	200	1.2	3.8	13-14	200	1.6	5.5	15-21	200	0.8	4.0
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Norms	Data from a representative sample of 2,350 subjects was used to develop the normative scores. There are age-based standard scores, percentiles, and test-age equivalents available. The sample controlled for age/gender, race, geographic region, SES/parent education, and included special populations (did not say what specific special populations).																																																
Who Can Give the Test	Speech-language pathologist or another professional who is trained in phonetic transcription																																																
Strengths	Easy to administer; most widely used test of articulation; user-friendly color-coding for recording initial, medial, and final sounds as well as initial consonant blends; colorful, entertaining pictures to elicit responses																																																

Concerns	Limited sample size and cultural bias of standardization sample; developmental data given may be outdated; does not assess vowel production
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Auditory

Auditory Perception Test for the Hearing Impaired Revised (APT-HI)

Author	Susan Allen																								
Publisher	Plural Publishing Inc.																								
Purpose	Evaluates children's discrete auditory perception ability by profiling in 16 different skill areas; identifies specific auditory perception and processing deficits across the continuum of listening																								
Age Range	3;0 and older; Can also be applied to adults in auditory rehabilitation																								
Time	20-30 minutes																								
Scores or Subtests	Organized into 8 subtests of auditory perception tasks: (a) auditory awareness; (b) duration, intensity, and pitch identification; (c) prosodic perception; (d) vowel perception; (e) consonant perception; (f) other segmental perception; (g) linguistic perception and (h) communicative comprehension (some categories have subtests of skills, i.e. consonant perception tasks broken into consonants differing in voice, manner, and place of production)																								
Description	Measures speech perception capabilities in individuals with hearing loss ranging from mild to profound. Can be used to measure a student's progress in therapy over time, to relate speech production capabilities to auditory perception skills and to assist with identifying speech targets and discrete auditory tasks for training.																								
Reliability	Reliability was determined using a Spearman-Brown test of split-half reliability, correlation was 0.99. Kuder-Richardson test was used to determine the homogeneity of items in the test and gave resulting correlation of 0.97. Test-retest reliability: 0.98.																								
Validity	<p>Correlations and Coefficients of Determination Between APT/Hi Scores and Age and Degree of Hearing Loss</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Variable</th> <th style="text-align: center;">r</th> <th style="text-align: center;">r²</th> </tr> </thead> <tbody> <tr> <td>Age</td> <td style="text-align: center;">0.43</td> <td style="text-align: center;">0.18</td> </tr> <tr> <td>Pure Tone Avg-Unaided</td> <td style="text-align: center;">-0.69</td> <td style="text-align: center;">0.48</td> </tr> <tr> <td>Pure Tone Avg-Aided</td> <td style="text-align: center;">-0.77</td> <td style="text-align: center;">0.58</td> </tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Variable</th> <th style="text-align: center;">R</th> <th style="text-align: center;">R²</th> </tr> </thead> <tbody> <tr> <td>Age & pure tone avg -Aided</td> <td style="text-align: center;">0.84</td> <td style="text-align: center;">0.71</td> </tr> <tr> <td>Age & pure tone avg-Unaided</td> <td style="text-align: center;">0.81</td> <td style="text-align: center;">0.66</td> </tr> <tr> <td>Aided & Unaided</td> <td style="text-align: center;">0.86</td> <td style="text-align: center;">0.74</td> </tr> </tbody> </table>	Variable	r	r ²	Age	0.43	0.18	Pure Tone Avg-Unaided	-0.69	0.48	Pure Tone Avg-Aided	-0.77	0.58	Variable	R	R ²	Age & pure tone avg -Aided	0.84	0.71	Age & pure tone avg-Unaided	0.81	0.66	Aided & Unaided	0.86	0.74
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Norms	Piloted on 118 children with hearing loss; 55% male, 45% female; 72% European American, 13% African American, 14% Hispanic American, 1% other ethnic/racial backgrounds																								
Who Can Give the Test	Should be administered by professionals experienced in working with children who have hearing loss. Typically, SLP's, audiologists, educational diagnosticians, or classroom teachers of children with hearing loss. Should have fundamental core knowledge about equipment, appropriate amplification, the speech banana, behavioral conditioning, chronological age vs. hearing age, etc.																								
Strengths	Specifically designed for children with hearing loss																								
Concerns	Limited number of children in pilot study																								

Early Speech Perception Test (ESP)

Author	Jean S. Moog, Anne E. Geers
Publisher	Central Institute for the Deaf, St. Louis, MO
Purpose	Assesses speech discrimination skills of children with profound hearing loss
Age Range	Starting at 3 years
Time	15-20 minutes
Scores or Subtests	Standard Version: Pattern Perception, Spondee ID, Monosyllable ID, Total Low-verbal Version: Pattern Perception, Word ID (Spondee and Monosyllable), Total
Description	Assesses aspects of listening skills of children with profound hearing losses. The test focuses on the hierarchy of speech perception skills observed in children with hearing loss. It can be used to formulate goals/objectives for auditory training and to test progress in speech perception ability over time. It can also provide information on how the child is performing with amplification. Speech Perception Categories for profoundly hearing-impaired children: 1. No pattern perception; 2. Pattern perception; 3. Some word identification; 4. Consistent word identification.
Reliability	Test-Retest Reliability Correlation Coefficients: Standard Version- Pattern perception raw score: 0.78, Spondee and monosyllabic combined raw score: 0.89, category placement: 0.94 Low-Verbal Version- Pattern perception raw score: 0.75, Monosyllable and spondee combined raw score: 0.77, Category placement: 0.89
Validity	Standard Version: correlation with the WIPI, validity correlation coefficient of 0.87. Other validity data in charts in manual.
Norms	49 children (17 female, 32 male), ranging in age from 4 to 15 years, who attended classes at Central Institute for the Deaf. All children had better ear pure-tone threshold averages (at 500, 1000, and 2000 Hz) equal to or greater than 90 dB HL and displayed nonverbal intelligence quotients in the normal range. All children were also familiar with the vocabulary and tested only when wearing appropriate amplification.
Who Can Give the Test	Should be administered by professionals experienced in working with children who have hearing loss. Typically, SLP's, audiologists, educational diagnosticians, or classroom teachers of children with hearing loss.
Strengths	Specifically for children with hearing loss; easy to administer
Concerns	Only examines listening skills in four discrete categories; limited data on test-retest reliability and validity

Infant-Toddler Meaningful Auditory Integration Scale (IT-MAIS)

Author	Susan Zimmerman-Phillips, Mary Joe Osberger, Amy McConkey Robbins
Publisher	Advanced Bionics Corporation
Purpose	Modification of MAIS, structured interview schedule designed to assess the child's spontaneous responses to sound in his/her everyday environment. Consists of 10 probes which assess vocalization behavior, alerting to sounds, and deriving meaning from sound.
Age Range	Birth to 3 years
Time	Less than 10 minutes
Scores or Subtests	Total score only
Description	Parent does not directly fill out. Examiner uses probes to elicit child's spontaneous behavior and can ask parent questions to elicit further information. Combination of parent report & clinical observation. Ask parent to give as many examples as possible to make more accurate.
Reliability	Not available
Validity	Not available
Norms	Not available
Who Can Give the Test	Speech-language pathologist or teacher experienced in working with children who have hearing loss
Strengths	Fast administration time; provides information regarding parent's perception of child's response to sound in the natural environment.
Concerns	Parent responses may be biased; may not reflect actual behavior of the child

LittleEARS Auditory Questionnaire

Author	L. Tsiakpini, V. Weichbold, H. Kuehn-Inacker, F. Coninx, P. D'Haese and S. Almadin
Publisher	MED-EL
Purpose	Parent questionnaire that evaluates all types of auditory behaviors which are observable as a reaction to acoustic stimuli; follows auditory development of children after newborn hearing screening from birth to 24 mos; can also follow children with CI's or hearing aids with a hearing age of 0-24 mos
Age Range	Birth-24 mos./children with hearing loss with hearing age of 0-24 mos.
Time	10 minutes
Scores or Subtests	Total score only
Description	There are 35 questions which give expected values and minimal values for individual comparison. Also LittleEARS Diary, which provides a guided documentation and observation of the development of the child over half a year after device fitting.
Reliability	Scale analysis showed Pearson's: $r=0.91$, $r>0.6$. Split-half: $r=0.88$, criterion $r>0.7$. Guttman's $\lambda=0.93$, criterion >0.7 . Homogeneous, Cronbach's $\alpha=0.96$, criterion >0.7 . Proved reliable to record preverbal-auditory development within 1st 2 years of hearing.
Validity	Proved valid to record preverbal-auditory development within first 2 years of hearing. Also validation study of use of LEAQ in CI-children.
Norms	Standardization on 218 normal hearing children aged 0-24 mos. and currently being evaluated on children with cochlear implants
Who Can Give the Test	Parent Questionnaire
Strengths	Can assess preverbal auditory development in very young children; only takes about 10 min. for parents to complete; Spanish version available
Concerns	Parent responses may be biased; may not reflect actual behavior of the child

Meaningful Auditory Integration Scale (MAIS)

Author	Amy M. Robbins
Publisher	Advanced Bionics Corporation
Purpose	Parent report scale to assess a child's responses to sound in his/her everyday environment; 10 probes that include assessment of device bonding, alerting to sound, and deriving meaning from sound; designed for children with hearing loss who are aurally rehabilitated
Age Range	3-4 years and up
Time	Less than 10 minutes
Scores or Subtests	Device Usage Raw Score, Alerting to Sound Raw Score, Deriving Meaning Raw Score; Total Score out of a possible 40 points
Description	10 probes: 1. Does the child ask to have his device put on, or put in on himself, WITHOUT being told? 2. Does the child report and/or appear upset if his device is nonfunctioning for any reason? 3. Does the child spontaneously respond to his name in quiet when called auditorally-only with no visual cue? 4. Does the child spontaneously respond to his name in the presence of background noise when called auditorally-only with no visual cues? 5. Does the child spontaneously alert to environmental sounds (doorbell, telephone) in the home without being prompted or told to listen? 6. Does the child alert to auditory signals spontaneously when in new environments...? 8. Does the child show the ability to discriminate spontaneously among 2 speakers, using audition alone...? 9. Does the child spontaneously know the difference between speech and nonspeech stimuli when listening alone...? 10. Does the child spontaneously associate vocal tone (anger, excitement, anxiety) with its meaning, based on hearing only?
Reliability	Not available
Validity	Not available
Norms	Not available
Who Can Give the Test	Parent Questionnaire
Strengths	Provides information regarding parent's perception of child's response to sound in natural environment; quick and easy to administer
Concerns	Parent responses may be biased; may not reflect actual behavior of the child

Language

Clinical Evaluation of Language Fundamentals, Preschool 2 (CELF P-2)

Author	Elisabeth Wiig, Wayne Secord, Eleanor Semel
Publisher	The Psychological Corporation
Purpose	Measures a broad range of expressive and receptive language skills in preschool-aged children
Age Range	3;0-6;11
Time	30-45 minutes
Scores or Subtests	Subtests: Sentence Structure, Word Structure, Expressive Vocabulary, Concepts & Following Directions, Basic Concepts, Recalling Sentences, Word-Classes-Receptive, Word Classes-Expressive, Word Classes-Total Scores: Core Language, Receptive Language, Expressive Language, Language Content, and Language Structure; standard scores, percentile ranks, age equivalents, and growth scores
Description	The CELF-Preschool 2 is designed to assess performance in aspects of language that are fundamental to the development of effective communication skills. These are defined as receptive and expressive language abilities in the areas of word meanings (semantics), word and sentence structure (morphology and syntax), and recall of spoken language (auditory memory). There are six subtests, and the results can be used to identify language disorders, determine eligibility for treatment or special services programs, and analyze relative strengths and weaknesses in language.
Reliability	Test-retest reliabilities ranged from .94 for Expressive Vocabulary (5;0-5;11) to a low of .75 for Sentence Structure (6;0-6;11). Correlations across all ages ranged from a high of .90 for Expressive Vocabulary and Recalling Sentences to a low of .78 for Sentence Structure. Time between test and retest was 2-24 days. Internal consistency: average alpha coefficients across all ages ranged from high of .95 (Pre-Literacy Rating Scale and Descriptive Pragmatics Profile) to low of .77 (Basic Concepts). Some coefficients low (Basic Concepts .59 for 5;0-5;6 and .61 for 5;6-5;11).
Validity	Content validity: subtests and composite scores linked to research. Construct validity-moderate to high subtest intercorrelations. Concurrent validity between test and CELF-4 and PLS-4 moderate to high.
Norms	800 children representative of preschool population in US: gender, age, race-ethnicity, geographic region, mother's education level
Who Can Give the Test	Professionals with a graduate degree and specific training in language assessment and interpretation
Strengths	Colorful, appealing pictures; item analysis; fairly easy to administer and score; available in English and Spanish
Concerns	Lower than acceptable reliability for some subtests/age groups (particularly Expressive Vocabulary)

Clinical Evaluation of Language Fundamentals – 4 (CELF – 4)

Author	Eleanor Semel, Elisabeth Wiig, Wayne Secord
Publisher	PsychCorp, Harcourt Assessment
Purpose	Measures a broad range of expressive and receptive language skills in school-aged children, adolescents, and young adults
Age Range	5-21 years
Time	30-45 minutes
Scores or Subtests	Subtests: Concepts and Following Directions, Core Language, Expressive Language, Expressive Vocabulary, Familiar Sequences 1 and 2, Formulated Sentences, Language Content, Language Memory, Language Structure, Number Repetition 1 and 2, Phonological Awareness, Rapid Automatic Naming, Recalling Sentences, Receptive Language, Semantic Relationships, Sentence Assembly, Sentence Structure, Understanding Spoken Paragraphs, Word Associations, Word Classes 1 and 2 Receptive, Expressive, and Total, Word Definitions, Word Structure Scores: Core Language Receptive Language, Expressive Language, Language Content, Language Memory, and Working Memory; standard scores, percentile ranks, age equivalents, and growth scores
Description	Developed to identify, diagnose, and provide follow-up evaluation of language and communication disorders in children, adolescents, and young adults. Like the CELF-Preschool 2, the test assesses language content and form in both expressive and receptive language modalities; CELF-4 includes a subtest for the assessment of pragmatics
Reliability	The authors evaluated the reliability of the CELF-4 with measures of test-retest, internal consistency, and interscorer reliability. Results of test-retest reliability with 320 students yielded high correlations for all age groups' composite scores (.90+). However, test-retest reliability coefficients for each subtest and each age group range from poor (.60) to excellent (.90+) with an average administration interval of 16 days. Measures of internal consistency revealed higher reliability for the composite scores than for individual subtest scores. Reliability alpha coefficients range from .89 to .95 for the former and from .70 to .91 for the latter.
Validity	The authors provide evidence of content validity by indicating that they conducted a thorough review of the literature on the development of language skills of 5- to 21-year-old students. As a result, the language skills sampled (e.g., morphology, syntax, semantics) reflect well-documented language constructs. The authors show response process validity by showing that the verbal responses and behaviors required of the examinees to accomplish the tasks measured language skills by providing a sound rationale for the selection of subtest tasks in terms of language components and their rules (e.g., semantics, syntax), language modalities (receptive, expressive), and cognitive skills (e.g., working memory). The internal structure of the test was assessed by factor analysis, which yielded high correlations between the Core Language score and the other language indexes. In addition, Expressive and Receptive Language were highly correlated at all age levels and their respective indexes showed moderate-to-high correlation with other indexes and composite scores.

Norms	Standardized on 2,650 students; 5- to 17-year-olds included 200 examinees at each age level, 17- to 21-year-olds included 50 students for each age year. The sample represented the U.S. population with respect to age, gender, race/ethnicity, geographic region, and parent education level. In contrast to earlier versions of the test, which included only normally developing children, about 9% of children in the CELF-4 normative sample were receiving special services and 7% were diagnosed with speech and/or language disorders. These numbers are consistent with those reported by the National Dissemination Center for Children with Disabilities (2003) and the U.S. Office of Education Program (n.d.a, n.d.b) for children in special education.
Who Can Give the Test	Professionals with a graduate degree and specific training in language assessment and interpretation
Strengths	Evaluates multiple aspects of language, pragmatics, and memory; available in English and Spanish
Concerns	If all subtests are administered, administration time can be lengthy and fatigue of the child may influence scoring

Comprehensive Assessment of Spoken Language (CASL)

Author	Elizabeth Carrow-Woolfolk
Publisher	Pearson Assessments, PsychCorp
Purpose	Designed to measure the processes of comprehension, expression, and retrieval in oral language; assesses lexical and syntactic as well as pragmatic and supralinguistic language skills
Age Range	3-21 years old
Time	30-45 minutes for core battery
Scores or Subtests	<p>Consists of 15 subtests in 4 language structure categories</p> <p><u>Lexical/semantic tests:</u> Comprehension of Basic Concepts (age 3:0-4:11, Core Test; age 5:0-6:11, Supplemental Test) Antonyms (age 5-12, Core Test, age 13-21, Supplemental Test), Synonyms (age 7-12, Supplemental Test; age 13-21 Core Test), Sentence Completion (age 3-21, Supplemental Test), and Idiomatic Language (age 11-21, Supplemental Test)</p> <p><u>Syntactic Components:</u> Syntax Construction (age 3-10, Core Test, age 11-21 Supplemental Test), Paragraph Comprehension of Syntax (age 5-10, Core Test; ages 3-4 and 11-12, Supplemental Test), Grammatical Morphemes (age 11-12 Core Test; ages 7-10 and 13-21 Supplemental Test), Sentence Comprehension of Syntax (age 11-12, Core Test; age 13-21, Supplemental Test), and Grammaticality Judgment (age 7-12, Supplemental Test; age 13-21 Core Test)</p> <p><u>Supralinguistic component tests:</u> Nonliteral Language, Meaning from Context, Inference, and Ambiguous Sentences</p> <p><u>Pragmatic test:</u> Pragmatic Judgment</p>
Description	Developmentally based battery of oral language tests. It uses a purely linguistic orientation, so the subject does not need to know how to read or write—only pointing, single word, or open-ended verbal responses required. Subtests designed to assess auditory comprehension, receptive, and expressive spoken English language competence. Provides an in-depth evaluation of oral language processing systems, knowledge and use of words and grammatical structures of language, ability to use language to assist higher level cognitive functions, and the contextual/communicative use of language (pragmatics)
Reliability	Test-retest reliabilities ranged from .65 to .95 for the Core Battery scores and .88 to .96 for the Indices. Split-half reliability yielded reliabilities of .80 to .90. Split-half reliability yielded reliabilities of .80 to .90.

Validity	<p>The intercorrelation coefficients among CASL tests range from .30 to .79, low enough to support the interpretation that each test is measuring something unique but high enough to support their combination to produce the Core Composite and Index scores. (See Chapter 8 in manual for complete reporting of intercorrelation coefficients.)</p> <p>Correlations with other measures of language: The CASL was correlated with the following: TACL-R (35 examinees aged 5-0 to 5-11), OWLS LC and OE (50 examinees aged 7-10 to 10-11), PPVT-III (45 examinees aged 7-1 to 10-11) EVT (45 examinees aged 7-1 to 10-11) (See Chapter 8 in manual for complete reporting of these correlations.)</p> <p>Correlations with measures of cognitive ability: The CASL was correlated with the following: K-BIT (52 examinees aged 14-0 to 17-9) (See Chapter 8 in manual for complete reporting of these correlations.)</p> <p>Construct: Developmental progression of scores, intercorrelations of tests, and factor structures of the Indexes show construct validity. (See Chapter 8 in manual for construct validity data.)</p> <p>Clinical Sample: Differences between means of clinical and control group in Core Composite scores in the following areas: Speech Impairment: 1.5 Language Delay: 12.4* Language Impairment: 15.6* Mental Retardation: 32.2* Learning Disability (Reading): 9.9* (ages 8-11); 14.5* (ages 12-18) Learning Disability (Undifferentiated): 20.3* Emotional Disturbance: 9.9* Hearing Impairment: 26.2</p> <p>* = significant at .001 level</p>
Norms	Normed on nationwide standardization sample of 1,700 examinees, stratified to match U.S. census data on gender, race/ethnicity, region, and maternal ed.
Who Can Give the Test	Professionals with a graduate degree and specific training in language assessment and interpretation
Strengths	Easy to administer
Concerns	Black-and-white drawings; occasional scoring inconsistencies; not always clear about when to administer supplemental tests

Illinois Test of Psycholinguistic Abilities – 3 (ITPA-3)

Author	Donald Hammill, Nancy Mather, Rhia Roberts
Publisher	PRO-ed
Purpose	Measures children's spoken and written language skills; subtests assess oral language, writing, reading, and spelling
Age Range	5;0 - 12;11
Time	45-60 minutes
Scores or Subtests	12 subtests: Spoken Analogies, Spoken Vocabulary, Morphological Closure, Syntactic Sentences, Sound Deletion, Rhyming Sequences, Sentence Sequences, Written Vocabulary, Sight Decoding, Sound Decoding, Sight Spelling, Sound Spelling
Description	Based on Charles Osgood's original communication model and adaptations of that model made by Samuel Kirk, James McCarthy, and Winifred Kirk. Underlying assumptions: 1. language is an important part of a child's development. 2. the essential components of language are measurable. 3. these language components can be improved through instruction. 4. instruction in language is relevant to success in basic school subjects, particularly reading and writing. Helps determine children's specific strengths and weaknesses among linguistic abilities and differentiate between children with poor phonological coding and/or poor orthographic coding.
Reliability	Correlations between subtests. Average coefficients for individual and subtest composites are at 0.90 or greater, except for Rhyming Sequences, 0.79. Time sampling error measured using test-retest, correlations ranged from 0.86-0.99, mean correlation across the test 0.95 (2 weeks in between). Inter-scorer correlations ranged from 0.95-0.99.
Validity	<p>Content-description: Authors provide rationales for format and items. Psychometric and demographic support is given for 4 clinical groups. Evidence present to validate content is in agreement with Osgood's (1957) model. Conventional item analysis data presented and differential item functioning analysis was done to identify items with bias.</p> <p>Criterion-prediction: Strong, correlation data comparing ITPA-3 to same child's performance on either Woodcock-Johnson Psycho-ed. Battery-Revised, Comprehensive Scales of Student Abilities, Comprehensive Test of Phonological Processing, Test of Language Development-Intermediate: Third ed. All but one subtest demonstrated correlation coefficients of at least 0.75.</p> <p>Construct-identification validity: data showing test correlates as well with child's age, differentiating between children with different language levels, subtest score inter-correlations, relationship to school achievement, relationship to intelligence, confirmatory factor analysis, and subtests correlation to total test performance.</p>
Norms	1,522 children aged 5-12, from 27 states. Selected to reflect nation based on geographic region, gender, race, rural or urban residence, ethnicity, family income, educational attainment of parents, and disability status

Who Can Give the Test	Professionals with a graduate degree and specific training in language assessment and interpretation
Strengths	Psychometrically sound measure of children's psycholinguistic abilities; easy to administer and score
Concerns	Interpretation requires knowledge and competence in language development and psycholinguistics

MacArthur-Bates Communicative Development Inventories

Author	Larry Fenson, Philip S. Dale, Steven J. Reznick, Donna Thal, Elizabeth Bates, Jeffery P. Hartung, Steve Pethick, Judy S. Reilly
Publisher	The Psychological Corporation
Purpose	Evaluates young children's communication skills with norm-referenced parent checklists
Age Range	8-30 months
Time	20-30 minutes
Scores or Subtests	Consists of two forms/subtests: Words and Gestures (8-16 months) and Words and Sentences (16-30 months)
Description	The infant inventory generates scores for vocabulary comprehension, vocabulary production, and use of gestures. The toddler inventory yields scores for vocabulary production and various aspects of grammatical development. The inventories are completed by parents and rely on a recognition format rather than requiring parents to recall information.
Reliability	All three vocabulary scales and the sentence complexity scales demonstrate high internal consistency with alpha values of .95 or greater. Test-retest reliability: .8-.9+
Validity	Good face/content validity. Concurrent validity was examined by comparing results to child performance on associated laboratory measures, such as the OWEVT, PLS-4, and Bayley Expressive Language Scale. These correlations were in the .53 to .73 range. It would not be expected that correlations would be higher since the inventories assess a broader vocabulary range than in possible in a picture identification task.
Norms	Normative data are based on 671 infants and 1,142 toddlers from New Haven, Seattle, and San Diego. 77% of the norming population had at least some college education, indicating a lack of representativeness of the norming population.
Who Can Give the Test	Parent /caregiver inventory
Strengths	Can be used to document a child's present language level, to develop intervention goals for vocabulary development, and to document vocabulary changes over time; particularly useful for a family-centered early intervention approach
Concerns	Inventories should not be used to identify infants or toddlers as language delayed, due to the lack of representativeness in the normative sample

Oral and Written Language Scales (OWLS)

Author	Elizabeth Carrow-Woolfolk
Publisher	American Guidance Service
Purpose	Designed to assess receptive and expressive language
Age Range	3;0 - 21;11
Time	15-40 minutes
Scores or Subtests	3 scores--Listening Comprehension, Oral Expression, Oral Composite
Description	Listening Comprehension: measured by asking the examinee to select one of four pictures that best depicts a statement Oral Expression: assessed by asking the examinee to look at one or more line drawings and respond verbally to a statement by the examiner (i.e. tell me what is happening here and how the mother feels...) Tests not typical of classroom tasks. Examiner can conduct a descriptive analysis of correct and incorrect responses on the Oral Expression subtest, different classifications of error types. Computer scoring and interpretation available. Test provides opportunity to capture pragmatic and supralinguistic structures of language, connected language.
Reliability	Reliability type LC OE Oral comp. Internal Consistency .84 .87 .91 Test-retest .76 .81 .85 Interrater - .95 -
Validity	<u>Content Validity</u> : Detailed construct definitions and descriptions of the scales are provided. <u>Construct Validity</u> --Developmental Progression of Scores: Listening Comp. and Oral Expression Scales, steady increases in mean raw scores throughout the age range with greater increases in early years and more gradual changes in later years. Intercorrelations of the Scales: Moderate intercorrelations between Listening Comp. Scale and Oral Expression Scale, coefficients range from .54 to .77 (mean = .70); Low enough to support that each scale measures something unique but high enough to support combination to produce Oral Composite <u>Criterion-Related Validity</u> : Administered OWLS to group of individuals with mild-to-moderate hearing impairment.
Norms	1,795 subjects ranging in age from 3-21 years. Grouped by 6-month age intervals. Sample representative of the U.S. population for gender, geographical region, race/ethnicity, and SES. Norms established by age level.
Who Can Give the	This test should be administered by a professional trained in standardized assessment of children, including but not limited to speech-language

Test	pathologists.
Strengths	Both Listening Comprehension and Oral Expression subtests constructed on a basis of a strong theoretical foundation; the test is fairly easy to administer
Concerns	Because there are no subtests, it does not help identify a child's language strengths and weaknesses

Preschool Language Assessment Instrument – 2 (PLAI-2)

Author	Marion Blank, Susan A. Rose and Laura J. Berlin
Publisher	Pro-ed
Purpose	Developed to test a preschool child's discourse skills across 4 different levels of abstraction and two modes of response.
Age Range	3;0 to 5;11
Time	30 minutes
Scores or Subtests	Subtests: matching, selective analysis, reordering and reasoning Scores: scaled scores, percentile rank, age equivalent, and discourse ability standard score (calculated from two modes of response: expressive & receptive)
Description	Assesses how effectively a child integrates cognitive, linguistic and pragmatic components to deal with student-to-teacher verbal exchanges. Looks at how a child understands and answers different levels of abstract questions.
Reliability	Reliability coefficients of .80 and above were obtained for the Receptive and Expressive Subtests and the Discourse Ability Score across content and time sampling
Validity	Based on information from the examiner's manual, the PLAI-2 is a valid measure of children's discourse skills.
Norms	Normed on a sample of 463 children in 16 states. Data was collected between spring 1999 and fall 2000. The characteristics of the sample with regard to geographic region, gender, race, ethnicity, family income, educational attainment of parents and disability were compared to those reported in the <i>Statistical Abstract of the United States</i> (1999) for the preschool-age population. The comparison demonstrates that the PLAI-2 sample is representative.
Who Can Give the Test	Anyone who is reasonably competent in the administration of tests in education, language, and psychology.
Strengths	Questions are based off what may be seen in the classroom; includes a nonstandardized assessment which provides diagnostic information about two pragmatic aspects of a child's communication – adequacy of response and selected interfering behavior.
Concerns	Does not give detailed language information (should be used in conjunction with another language test such as the PLS-4 or CELF-Preschool 2)

Preschool Language Scale – 4 (PLS-4)

Author	Irla Lee Zimmerman, Violette G. Steiner, Roberta Evatt Pond
Publisher	Harcourt Assessment Inc.
Purpose	Designed to identify children who have a language disorder or delay
Age Range	Birth to 6;11
Time	20-45 minutes
Scores or Subtests	Consists of 2 core subscales, Auditory Comprehension subscale (AC) and Expressive Communication subscale (EC); Supplemental Instruments- Language Sample Checklist, Articulation Screener, and Caregiver Questionnaire. 3 scores: AC, EC, and Total Lang (TL)
Description	Manipulatives needed for test: medium-sized ball, 5 blocks, 2 small bowls, box with lid, bubbles, 2 small toy cars, a cloth, crackers, 3 small cups, 3 keys on a key ring, paper sandwich bag, 3 plastic spoons, rattle, squeaky toy, teddy bear, several age appropriate books/toys, watch with a second hand, and a windup toy
Reliability	Test-retest subscale stability coefficients 0.82-0.95. Cronbach's alpha ranged 0.81-0.91 for TL score. Standard error of measurement reliability coefficient ranged 0.66-0.97, with means of 0.86 on AC, 0.91 on EC, and 0.93 for TL. Inter-rater reliability at 99% (only scores on open-ended tasks used, don't know which tasks considered open-ended). Large differences in amount of time taken to administer and score the test. Possible inconsistencies in administration.
Validity	Elicits similar responses, scoring, and interpretation as the Denver II, which assesses language development level in children. Correlation between PLS-3 and PLS-4 0.65 (AC) and 0.79 (EC). Extensive expert checks throughout instrument development.
Norms	2,400 children who could speak and understand English. Data was collected at 357 sites in 48 states. Age and gender represented equally. Sample stratified based on 2000 Census data by ethnicity, SES, and geography. 13.2% participants identified with conditions/diagnoses.
Who Can Give the Test	The core subscales (AC and EC) should be administered and scored by qualified users who might include speech-language pathologists, early childhood specialists, psychologists, educational diagnosticians, and others with training in assessment
Strengths	Child friendly; colorful, appealing pictures and toys; item analysis; available in English and Spanish
Concerns	Concerns over consistency of administration and scoring; some concern that scores may be inflated when compared to other language tests

Reynell Developmental Language Scales

Author	Joan K. Reynell, Christian P. Gruber
Publisher	Western Psychological Services
Purpose	Developed to measure verbal comprehension and expressive language skills
Age Range	1;0-6;11
Time	30 minutes
Scores or Subtests	Verbal comprehension and expressive language scores
Description	There are 134 test items (67 Verbal Comprehension, 67 Expressive Language). Objects are arranged in a series of scenes or vignettes. There are no basal or ceiling rules. This test is useful in evaluation language processes in children who show delayed development, or physical or psychological disabilities. It identifies the nature and extent of each child's language disability.
Reliability	Internal consistency reliability coefficients: Verbal Comprehension and Expressive Language scales: 0.90, some 0.80s, for children 3-6 to 4-11 coefficients in the 0.80s, coefficients for children 5-0 to 6-11 below 0.80
Validity	Criterion-related validity evidence (concurrent and predictive) was weak. Comes from study with New Zealand children over a decade ago. Limited applicability for American children.
Norms	Standardized on a sample of 619 children aged 1-0 through 6-11. Children were selected (non-randomly) by geographic region, ethnicity, parent education level, and sex.
Who Can Give the Test	Individuals experienced in language development and assessment
Strengths	Engaging stimulus materials; most reliability at youngest age levels
Concerns	Technical inadequacies; limited validity and data to support adequacy of test as a diagnostic tool

Rossetti Infant-Toddler Scale

Author	Louis Rossetti
Publisher	LinguiSystems
Purpose	Assess communication in the birth-to three population through direct observation, elicited behavior, or caregiver's report. Assesses preverbal and verbal areas of: interaction-attachment, pragmatics, gesture, play, language comprehension, & language expression, includes parent questionnaire
Age Range	Birth-3/Birth-preK
Time	about 45 minutes
Scores or Subtests	Areas Assessed: Interaction-Attachment, Pragmatics, Gesture, Play, Language Comprehension, Language Expression,
Description	Assesses preverbal and verbal areas of communication and interaction, provides an overview of the child's development; monitors early language development. Allows clinician to gather information by: direct observation of the behavior, elicit the desired behavior, and parent reporting of the behavior.
Reliability	Not available
Validity	Not available
Norms	Not available
Who Can Give the Test	This test should be administered by a professional trained in assessment of child language, including but not limited to speech-language pathologists
Strengths	Can assess preverbal and verbal aspects of infants' and toddlers' communication development; available in English and Spanish
Concerns	Parent responses may be biased; may not reflect actual behavior of the child

Literacy

Test of Early Reading Abilities – 3 (TERA-3)

Author	D. Kim Reid, Wayne P. Hresko, & Donald D. Hammill
Publisher	Pearson Assessments
Purpose	Assesses mastery of early developing reading skills; five identified purposes: (a) identify children who are below peers in reading development; (b) identify strengths and weaknesses of individual children; (c) document progress as a result of early reading intervention; (d) serve as a measure in reading research; (e) serve as one component of a comprehensive assessment
Age Range	3;6-8;6
Time	30 minutes
Scores or Subtests	Raw scores, age and grade equivalents, percentile scores, standard scores, and confidence scores for three subtests: Alphabet, Conventions, and Meaning. Overall Reading Quotient also calculated.
Description	Assesses the mastery of emergent literacy skills in young children
Reliability	Test-retest reliability (interval of 2 weeks) resulted in correlation coefficients near .88, most comparisons near .92. Interscorer reliability near .99. Content sampling, Subtest II, Conventions, demonstrates lower reliability (.83) compared to other subtests (about .90) and Reading Composite (.95).
Validity	Content validity established using reviewing research, comparing lists of emerging reading behaviors, subjecting items for expert examination, employing a conventional item analysis, and a differential item functioning analysis. All supported that items on TERA-3 represent behaviors consistent with those expected for emerging readers and without bias.
Norms	Relatively small norm sample, N=875. Matched to the general school- age population (gender, race, ethnicity, SES, disability, and urban/rural). Representative of regions across the US.
Who Can Give the Test	Nonclinical staff can administer, but authors recommend formal training in assessment with a basic understanding of testing statistics, and general procedures regarding test administration, scoring, and interpretation
Strengths	Accomplishes stated purposes; useful to combine with other assessments; easy to administer and score; based on modern reading theory.
Concerns	Validity depends on specific use in a given situation

Test of Preschool Early Literacy (TOPEL)

Author	Ronald A. Madle
Publisher	PRO-ed
Purpose	Designed to identify preschoolers who are at risk for literacy problems, allowing early intervention
Age Range	3;0 - 5;11
Time	25-30 minutes
Scores or Subtests	Print Knowledge, Definitional Vocabulary, Phonological Awareness; three subtests are combined to form a measure of emergent literacy skills: the Early Literacy Index (ELI).
Description	Measures abilities associated with early literacy. Identifies children at risk for literacy problems, assists with documenting progress in literacy intervention programs, and provides a research measure of early literacy skills.
Reliability	ELI internal consistency coefficient of .96 (.95 to .96). Phonological Awareness coefficient (.87) is lower but still acceptable. Test-retest for the ELI over 2 weeks was .91, with a mean increase of 3 standard score points. The subtests showed 0-8-point increases on retesting with coefficients from .81 to .89. Interscorer agreement ranged from .96 for Print Knowledge to .98 for the ELI.
Validity	Authors provide review of professional literature on emergent literacy, demonstrating a consensus that skills in the areas of oral language, phonological awareness, and print knowledge serve as the cornerstones for learning to read and write. Authors provide rationale for selection of subtests, formats, and item content, citing both theory and empirical research. Conventional item analyses conducted. Criterion-prediction validity: all subtests and composite had large to very large (.59-.77) relationships with the other measures. Construct validity demonstrated by correlating subtest scores with age and by comparing performance of children from bilingual homes to Hispanic children from homes where only English is spoken.
Norms	Standardization sample of 842 children recruited from 12 states in the 4 major U.S. geographic regions. Sample stratified on age then examined by geographic area, gender, race/ethnicity, Hispanic ethnicity, family income, educational attainment of parents, and exceptionality status.
Who Can Give the Test	Trained professionals: early childhood educators, special educators, psychologists, or diagnosticians can administer the test after studying the manual and giving a recommended five trial administrations.
Strengths	Quick and easy to administer; well constructed standardization sample with high internal consistency and test-retest reliabilities
Concerns	Lack of adequate floors and ceilings across the ages covered; subtests cannot obtain suitably low or high scores at a number of ages; the test is heavily loaded on oral language below age 5

School Readiness/Academic

Boehm Test of Basic Concepts – 3rd Edition

Author	Ann Boehm
Publisher	PsychCorp, Harcourt Assessment
Purpose	Designed to assess school readiness or to identify students who may be at risk for learning difficulty
Age Range	Grades K-2 (age 5;0 - 7;11)
Time	30-45 min. if administered in 1 session; 45-60 min. if administered in 2 sessions
Scores or Subtests	Fifty items are administered in either Form E or F. There is a total score only.
Description	Assesses students' understanding of concepts related to school success. Defines basic concepts as words that describe qualities of people or objects, spatial relationships, time, and quantity
Reliability	Internal consistency coefficients 0.80-0.91. Standard error measurement ranged from 1.14-2.43, indicating overall low variability. Test-retest reliability coefficients ranged from 0.80-0.89.
Validity	Correlation between Boehm-3 and Boehm-R ranged from 0.61-0.96. Correlation between Boehm-3 and Metropolitan Achievement Tests, 8th ed: 0.58-0.88. Boehm-3 and Metropolitan Readiness Test, 6th ed: 0.48-0.63. Correlation between Boehm-3 and Otis-Lennon School Ability Test, 7th ed: 0.45-0.68. Correlation between Forms E and F on Boehm-3, fall to spring long. study (273 K students) was 0.78.
Norms	Fall and spring standardization samples, fall over 6,000 students in K, 1st, and 2nd grade. Spring over 4,000 students.
Who Can Give the Test	Test may be administered by teachers or other professionals with experience administering tests, such as speech-language pathologists
Strengths	The connection between understanding basic concepts and early school success remains a primary concern, lending credibility to this test
Concerns	Because it is newly developed, the Spanish edition lacks the breadth and depth of reliability and validity evidence that supports the English edition; only assesses receptive skills

Boehm Test of Basic Concepts – Preschool Version

Author	Ann Boehm
Publisher	PsychCorp, Harcourt Assessment
Purpose	To measure a child's knowledge of 26 basic relational concepts considered necessary for achievement in the beginning years of school; designed to assess knowledge of basic relational concepts such as up-down, tallest-shortest
Age Range	3;0 - 5;0
Time	20-30 minutes
Scores or Subtests	Total score only. Test consists of 76 items with different starting points for three and four year olds.
Description	Research shows child's knowledge of basic concepts related to kindergarten readiness, school achievement, and performance on psychoeducational test instruments. The test can help identify a child's specific concept weaknesses, which can be relevant for teachers. The test looks at 26 concepts, two questions for each = 56 test items. The child can earn either a score of 2, 1, or 0 on each concept. 2=child is familiar with concept and its meaning, 1 or 0=need for further instruction on the concept. There are 5 warm-up questions that examiner can "help" with but does not explain level of help that should be provided.
Reliability	Items selected based on careful review of research but manual doesn't describe how test was reduced from 40 to 26 concepts. All items were made sure to be up-to-date and appropriate. The latest version includes more difficult items. Internal consistency coefficient alpha ranged from 0.85 to 0.92. Standard error of measurement ranged from 2.08 to 2.88, indicating low variability. Test-retest coefficients ranged from 0.90 to 0.94.
Validity	Content validity compared concepts covered to other tests & research supports the inclusion of the topics. Concurrent validity between Boehm-P and Boehm-3 correlation was 0.94. Between Boehm-P and Bracken Basic Concept Scale-Revised, 0.80 for 3-year olds and 0.73 for 5-year olds.
Norms	660 children representative of U.S. population in terms of gender, race/ethnicity, region, and parental education. Sampled at 6-month intervals from 3;0 - 5;11 years old.
Who Can Give the Test	Test may be administered by teachers or other professionals with experience administering tests, such as speech-language pathologists
Strengths	This test may be a good screening tool for children prior to entering 1 st grade
Concerns	Should not be only tool used to determine school readiness; only assesses receptive skills

Bracken Basic Concept Scale, Receptive and Expressive – Revised

Author	Bruce A. Bracken
Publisher	Psychological Corporation
Purpose	Designed to assess basic concept development of children. Measures comprehension of 308 foundational and functionally relevant educational concepts in 11 subtests or concept categories.
Age Range	2;6 - 7;11
Time	10-15 minutes
Scores or Subtests	Colors, Letters, Numbers-Counting, Sizes, Comparisons, Shapes, Direction-Position, Self-Social Awareness, Texture-Material, Quantity, and Time-Sequence
Description	Can be used diagnostically or as a screening test by scoring first six subtests, which make up the School Readiness Composite (SRC). Can be used for norm-referenced, criterion-referenced, or curriculum-based assessments. The Bracken is a developmentally sensitive measure of children's basic concept acquisition and receptive language skills. Enables examiner to assess important conceptual and receptive language abilities.
Reliability	Split-half reliability coefficients ranged 0.78-0.98 for the subtests and 0.96-0.99 for the entire test. SEM subtests range from 0.4-1.4, with a median of 0.75. The total test SEMs range from 1.6-2.8, with a median of 1.85. Test-retest reliability: Subtest reliabilities rang from 0.78 (Quantity, Time/Sequence) to 0.88 (School Readiness Composite) with a median reliability coefficient of 0.81. Test-retest reliability for total test is 0.94.
Validity	Content Validity: Basic concept content well developed. Criterion validity: Concurrent- BBCS-R and BBCS T-test analyses revealed no significant differences between means on both tests. BBCS-R and WPPSI-R: strong correlations Predictive validity: SRC achieved between 82%-90% correct classification rates when identifying children who were nominated for retention by their classroom teachers. Construct BBCS-R and PLS-3: age-equivalent correlations ranged from 0.78 (Verbal Ability Age) to 0.86 (Language quotient). Internal validity: Subtest intercorrelations range 0.26-0.79 and subtests correlated with total test ranged 0.68-0.92.
Norms	Standardization sample was representative of general U.S. population and stratified by age, gender, race/ethnicity, region, and parent education level. Children were between the ages of 2;6 and 7;11, able to understand and speak English and able to attend to and take the test in English without modifications.
Who Can Give the Test	Designed to be administered by professionals knowledgeable in the administration and interpretation of educational instruments. Individuals who are involved with psychoeducational assessment of screening (e.g., school psychologists, educational diagnosticians, speech-language pathologists, and special education teachers); can be administered by paraprofessionals under appropriate supervision
Strengths	Manual provides information about making adaptations for individuals with special needs; there are two forms: expressive and receptive; available in English and Spanish

Concerns	May be difficult for preschool children to sit for either test (receptive or expressive) in one session
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Woodcock-Johnson Tests of Achievement

Author	Richard W. Woodcock, Kevin S. McGrew, and Nancy Mather
Publisher	Riverside Publishing
Purpose	Measures academic achievement across several subject areas
Age Range	2-90+ years
Time	Varies, about 5 minutes per test
Scores or Subtests	The WJ III NU Tests of Achievement has two parallel forms (A and B) that are divided into two batteries—Standard and Extended. The Standard Battery includes tests 1 through 12 that provide a broad set of scores. The 10 tests in the Extended Battery provide more in-depth diagnostic information on specific academic strengths and weaknesses. Examiners can administer the Standard Battery either alone or with the Extended Battery.
Description	Practitioners use the WJ III NU Tests of Achievement to help assess students for learning disabilities and to determine if they need special services. The WJ III NU Tests of Achievement include tests and clusters that directly parallel those outlined by IDEA and provide sound procedures for determining learning variances between abilities and achievement. <u>Subject areas tested include:</u> Oral Expression Listening Comprehension Written Expression Basic Reading Skills Reading Comprehension Reading Fluency Math Calculation Skills Math Reasoning
Reliability	Most of the WJ III NU tests show strong reliabilities of .80 or higher; several are .90 or higher. The WJ III NU interpretive plan is based on cluster interpretation. The WJ III NU clusters show strong reliabilities, most at .90 or higher. The reliability characteristics of the WJ III NU meet or exceed basic standards for both individual placement and programming decisions.
Validity	Content validity has been demonstrated in relation to the Cattell-Horn-Carroll theory of cognitive abilities. Internal validity was demonstrated with high correlations, and concurrent validity was tested against the Wechsler Preschool and Primary Test of Intelligence – Revised. Correlations ranged from .66 - .73.

Norms	Normative data for the test were gathered from 8,818 subjects in over 100 geographically diverse communities in the United States. Individuals were randomly selected within the stratified sampling design that controlled for 10 specific community and individual variables and 13 socioeconomic status variables. The sample consisted of 1,143 preschool subjects; 4,784 kindergarten to twelfth-grade subjects; 1,165 college and university subjects; and 1,843 adult subjects. The WJ III NU uses continuous-year norms to yield normative data at 10 points in each grade. It provides age-based norms by month from ages 24 months to 19 years and by year from ages 2 to 90+ years. And it provides grade-based norms for kindergarten through 12th grade, 2-year college, and 4-year college, including graduate school.
Who Can Give the Test	Any person administering the WJ III ACH needs thorough knowledge of the exact administration and scoring procedures and an understanding of the importance of adhering to these standardized procedures. Competent interpretation of the WJ III ACH requires a higher degree of knowledge and experience than is required for administering and scoring the tests. Graduate-level training in educational assessment and a background in diagnostic decision-making are recommended. Only trained and knowledgeable professionals who are sensitive to the conditions that may compromise, or even invalidate, standardized test results should make interpretations and decisions. The level of formal education recommended to interpret the WJ III ACH is typically documented by successful completion of an applicable graduate-level program of study that includes, at a minimum, a practicum-type course covering administration and interpretation of tests of academic achievement.
Strengths	Good measure of general achievement
Concerns	Test time can be quite long when all subtests are administered at once

Vocabulary

Expressive One-Word Picture Vocabulary Test (EOWPVT)

Author	Editor Rick Brownell
Publisher	Academic Therapy Publications
Purpose	Designed to assess an individual's single-word expressive vocabulary
Age Range	2 - 18;11
Time	10-15 minutes
Scores or Subtests	Total score only
Description	The child is shown a picture and is asked to label it.
Reliability	Coefficient alpha to assess homogeneity of test items, median coefficient was 0.96 with range of 0.93 to 0.98. Split-half coefficients reflected median of 0.98 --> good internal consistency; Test-retest: only 20 days in between but strong test-retest correlations; Inter-rater reliability: strong confidence level for inter-rater reliability
Validity	Content-test: simplicity doesn't test other language skills; correlated with 12 other vocabulary measures but correlations not high, median 0.79; Construct: does not correlate well with tests of other domains.
Norms	Normed on 2,327 individuals, norms reflect use of broad demographic characteristics.
Who Can Give the Test	This test should be administered by a professional trained in standardized assessment of children, including but not limited to speech-language pathologists.
Strengths	Colorful illustrations; directions included on record form along with prompts; speed of administration; can be used in conjunction with ROWPVT to assess receptive and expressive vocabulary
Concerns	Limited scope of test; only assesses child's ability to label

Expressive Vocabulary Test – 2 (EVT – 2)

Author	Kathleen T. Williams
Publisher	Pearson Assessments
Purpose	Designed to assess an individual's single-word expressive vocabulary
Age Range	2;6 and older
Time	10-20 minutes
Scores or Subtests	Total score only.
Description	Some of the test items require the child to label items while others require the child to produce a synonym. (e.g. The child is shown a picture and the examiner says, "Tell me another word for <i>below</i> .") Some other items require the child to produce a word when given a definition. (e.g. The child is shown a picture and the examiner says, "Tell me a word that means a trip by sea.")
Reliability	<p>Internal consistency reliability By Age:</p> <p>Split-Half</p> <ul style="list-style-type: none"> • Form A: M = .94 • Form B: M = .93 <p>Standard Error of Measurement</p> <ul style="list-style-type: none"> • Form A: 3.8 • Form B: 3.9 <p>By Grade:</p> <p>Split-Half</p> <ul style="list-style-type: none"> • Form A: M = .93 • Form B: M = .93 <p>Standard Error of Measurement</p> <ul style="list-style-type: none"> • Form A: 4.0 • Form B: 4.0 <p>Alternate-form reliability By Age: M = .87</p> <p>Test-retest reliability By Age: M = .95</p>

Validity	<p>EVT–2 With the PPVT–4 Scale (N = 3,540): Average r = .82</p> <p>EVT–2 With the CASL: Ages 3–5 years (N = 68) • Basic Concepts: r = .59 • Antonyms: r = .67 • Sentence Completion: r = .51 Ages 8–12 years (N = 62) • Synonyms: r = .50 • Antonyms: r = .84 • Sentence Completion: r = .72 • Lexical/Semantic Composite: r = .80</p> <p>EVT–2 With the CELF-4 Scale: Ages 5–8 years (N = 55) • Core Language: r = .80 • Receptive Language: r = .68 • Expressive Language: r = .79 Ages 9–12 years (N = 56) • Core Language: r = .75 • Receptive Language: r = .69 • Expressive Language: r = .77</p> <p>EVT–2 With the GRADE (Total Test score): • K, Fall (Level P, N = 50): r = .76 • K, Spring (Level K, N = 65): r = .59 • 1 (N = 52): r = .60 • 2 (N = 48): r = .57 • 3 (N = 63): r = .79 • 4 (N = 61): r = .72 • 6 (N = 49): r = .64 • 8 (N = 47): r = .67 • 10–11 (N = 52): r = .64</p> <p>EVT–2 With EVT (N = 377): Average r = .81</p>
Norms	<p>Data from 4,000 individuals was used for the norm sample. This sample was matched to the U.S. population for sex, race/ethnicity, geographic region, SES, and clinical diagnosis or special ed. placement. Standardization occurred in fall 2005 and spring 2006.</p>
Who Can Give the Test	<p>This test should be administered by a professional trained in standardized assessment of children, including but not limited to speech-language pathologists.</p>
Strengths	<p>Easy to administer, age appropriate starting points are tabbed in the test book; Quick evaluation of expressive vocabulary and word retrieval; assesses more than ability to label; can be used in conjunction with PPVT to assess receptive and expressive vocabulary</p>
Concerns	<p>Inter-scorer consistency has not been demonstrated; criterion-related validity is limited</p>

Peabody Picture Vocabulary Test – 4 (PPVT-4)

Author	Lloyd M. Dunn and Douglas M. Dunn
Publisher	Pearson Assessments
Purpose	Designed to assess an individual's single-word receptive vocabulary
Age Range	2;6 - 90 years and older
Time	10-15 minutes
Scores or Subtests	No subtests. Can be used along with a test of expressive vocabulary if desired. Scores: Raw scores converted to standard scores, can be converted to percentile ranks, normal curve equivalents, stanines, and age and grade equivalents.
Description	The PPVT-4 is an individually administered, untimed measure of receptive vocabulary. There are two forms, Form A and Form B. Both forms consist of 228 items, each containing four colored pictures arranged on a single space. The examinee points to the picture that best describes the meaning of a word spoken verbally by the examiner.
Reliability	Internal consistency reliability By Age: Split-Half • Form A: M = .94 • Form B: M = .94 Standard Error of Measurement • Form A: 3.6 • Form B: 3.6 By Grade: Split-Half • Form A: M = .95 • Form B: M = .94 Standard Error of Measurement • Form A: 3.6 • Form B: 3.7 Alternate-form reliability By Age: M = .89 Test-retest reliability By Age: M = .93

Validity	<ul style="list-style-type: none"> • Validity: Correlations The PPVT–4 Scale With the EVT–2 (N = 3,540): Average r = .82 The PPVT–4 Scale With the CASL: Ages 3–5 years (N = 68) <ul style="list-style-type: none"> • Basic Concepts: r = .50 • Antonyms: r = .41 • Sentence Completion: r = .54 Ages 8–12 years (N = 62) • Synonyms: r = .65 • Antonyms: r = .78 • Sentence Completion: r = .63 • Lexical/Semantic Composite: r = .79 <p>The PPVT–4 Scale With the CELF-4 Scale: Ages 5–8 years (N = 55) <ul style="list-style-type: none"> • Core Language: r = .73 • Receptive Language: r = .67 • Expressive Language: r = .72 </p> <p>Ages 9–12 years (N = 56) <ul style="list-style-type: none"> • Core Language: r = .72 • Receptive Language: r = .75 • Expressive Language: r = .68 </p> <p>The PPVT–4 Scale With the GRADE (Total Test score): <ul style="list-style-type: none"> • K, Fall (Level P, N = 50): r = .71 • K, Spring (Level K, N = 65): r = .40 • 1 (N = 52): r = .58 • 2 (N = 48): r = .43 • 3 (N = 63): r = .65 • 4 (N = 61): r = .66 • 6 (N = 49): r = .71 • 8 (N = 47): r = .79 • 10–11 (N = 52): r = .59 </p> <p>The PPVT–4 Scale With the PPVT-III Scale (N = 322): Average r = .84</p>
Norms	Data from 4,000 individuals was used for the norm sample. This sample was matched to the U.S. population for sex, race/ethnicity, geographic region, SES, and clinical diagnosis or special ed. placement. Standardization occurred in fall 2005 and spring 2006.
Who Can Give the Test	The PPVT-4 is designed to be administered by a Level B examiner (i.e., Bachelors degree with coursework in principles of measurement, administration, interpretation of tests, and formal training in the content area).
Strengths	Easy to administer with short test administration time; can be used in conjunction with EVT to assess expressive and receptive vocabulary
Concerns	Somewhat restrictive means of assessing receptive vocabulary due to single-word only format

Receptive One-Word Picture Vocabulary Test (ROWPVT)

Author	Editor Rick Brownell
Publisher	Academic Therapy Publications
Purpose	Assesses receptive vocabulary by asking examinee to match object's concept with name
Age Range	2 years (24 months) - 18;11
Time	10-15 minutes
Scores or Subtests	Total score only.
Description	170-item multiple choice test that assesses an individual's English-hearing vocabulary, reflecting the extent of their understanding of single words. Not a timed test; has basal and ceiling rules.
Reliability	Internal consistency-coefficient alpha range 0.97-0.99. Test-retest correlations ranged from 0.78-0.93, coefficient of 0.84 for entire sample, not good stability. Inter-rater reliability 100% agreement but small sample size (30)
Validity	Criterion-compared to 12 other tests that measure receptive language, correlation coefficients ranged from 0.44-0.97
Norms	Derived from random international sample of 2,327 (all primarily English speakers at school and home)
Who Can Give the Test	Speech/language pathologists, psychologists, counselors, learning specialists, physicians, occupational therapists, and other personnel who are under the supervision of a professional familiar with assessment and interpretation most often administer the test.
Strengths	Easy to administer with short test administration time; can be used in conjunction with EOWPVT to assess expressive and receptive vocabulary.
Concerns	Somewhat restrictive means of assessing receptive vocabulary due to single-word only format

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