I. General Information

Title of the test: Scales of Cognitive Ability for Traumatic Brain Injury (SCATBI)

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Publisher: PRO-ED, Inc., 8700 Shoal Creek Blvd, Austin, TX 78757-6897

Time required to administer: Approx. 2 hours

Cost of the Test: $300

II. Description of Test

Type/Purpose of Test: The primary purpose of the SCATBI is to provide a systematic method of assessing cognitive deficits associated with traumatic brain injury. The two primary uses of the SCATBI are to assess cognitive-linguistic status during recovery from head injury and to describe the extent of changes during a program of rehabilitation. The SCATBI was designed to measure cognitive processes that are often impaired as a result of traumatic brain injury. These cognitive processes include: perception, discrimination, organization, recall of information, and problem solving skills. The SCATBI consists of 5 subtests (scales): Perception and Discrimination, Orientation, Organization, Recall, and Reasoning. Each scale was developed in such a way that individual items within each testlet were designed to have a slight progression in difficulty from easiest to most difficult.

Population: Designed for use with patients with acquired brain damage. The standardization sample consisted primarily of patients with closed-head injuries; however, smaller percentages of patients with other brain damage were tested.

Focus of measurement:
___ Organic systems   ___x Abilities   ___ Participation/life habits   ___ Environmental Factors

III. Practical Administration

Ease of Administration: The SCATBI is relatively simple to administer. It takes very little set-up. You need to be familiar with the stimulus book, stimulus cards, and the cassette tape. Additional items needed to administer the SCATBI include an audio tape player, SCATBI stimulus manual, a pen or pencil for the patient to use, and a piece of scratch paper for the patient to use. The Record Form takes you through each step of the evaluation and what you should say and do for each testlet involved in the 5 subtests. Taking a few minutes to look over each testlet would help make the administration process run more smoothly. If the entire evaluation is going to be administered, it takes a significant amount of time (approx 2 hours). It may be difficult for the patient to maintain focus throughout the entire administration process; however, it is ideal to administer the entire test in one session if possible.

Clarity of Directions: The directions are clear and easy to understand. Both the manual and the record form have directions listed for each testlet involved in each of the 5 subtests. The record form is very clear and provides detailed instructions on exactly what to say and do for each testlet. The writing in blue on the record form tells you exactly how to score each testlet. The manual can be used to further understand how to record and score responses.

Scoring Procedures: First, compute testlet scores for each scale and record them in the appropriate boxes to the right of the items (pages 3-15 of record form). On page two of the record form (Raw Score Worksheet), record raw scores for each of the 41 SCATBI testlets. Sum the testlet scores for each scale and record score in the blank box located under the
appropriate scale heading. Next, find the ‘Summary’ box and record raw scores from each scale in coordinating box. Use the Norms Table 2 in the appendix to find percentile rank and standard scores. When the percentile rank and standard scores are found for each scale, record findings on page two of record form under the summary box.

A 'Lower Functioning Composite Score' can be found when time is limited or if a client is unwilling or unable to complete the entire test. Only administer and score for Perception and Discrimination, Orientation, and Organization. Use the results to find a composite score. The composite score is found in the same way as explained above, but instead use Norm Table 3 and refer to section labeled "Lower Functioning" to find percentile rank and standard scores.

“Higher Functioning Composite Scores” are used when a client can complete the lower level skills with great ease. The Recall and Reasoning scores are used to determine a composite score for the higher functioning individual. They are found in the same way as described above, but refer to Norms Table 3 under “Higher Functioning” to find percentile rank and standard scores.

Compute the SCATBI composite score. Transfer all standard scores form the summary box to the composite grid on the bottom of page 2 on the Record Form. Sum the standard scores and record them in the 'sum std score' box. Use Norms Table 3 in the appendix. Refer to section entitled 'composite scores'. You have the option of finding composite scores for Lower Functioning, Higher Functioning, or SCATBI Total (all 5 scales). Find the Severity Score by using the composite scores and referring to Norm Table 4 in the appendix. Record Severity Score on bottom right corner of page 2 in Record Form.

Examiner Qualification & Training: Administration is recommended to be done by a certified speech-language pathologist, neuropsychologist, or other specialist trained to assess patients with closed-head injury. The examiner should have a good working knowledge of norm-referenced test procedures and interpretation.

IV. Technical Considerations

Standardization:  ___ X__ Norms ___ Criterion Referenced ___ Other ______________________

Reliability: Test-Retest, Internal Consistency, Cronbach’s Alpha, Inter-rater

Validity: Content, Construct, Criterion

Manual:  ___ X__ Excellent ___ Adequate ___ Poor

What is (are) the setting/s that you would anticipate using this assessment?
Inpatient Behavioral Psych unit, Neuro Rehab, Outpatient Clinic

Summary of strengths and weaknesses:
Weakness:
  ● Time consuming to administer the entire test; however, you are able to administer only select portions of the test. It does not have to be administered in its entirety.
  ● A few of the sections may be somewhat outdated
  ● expensive

Strength:
  ● Valid and Reliable
  ● Addresses specific cognitive deficits found in the population it was intended to assess
  ● Compact and easy to set-up and clean-up
  ● Clear directions on how to score, administer, and interpret.