

RBANS Report Write-Up Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · July 2026

The RBANS (Randolph; Pearson, 1998; Update 2012) is a 30-minute neuropsychological screening battery for ages 12 to 89: twelve subtests, five index scores plus a Total Scale (mean 100, SD 15), and four parallel forms built for retesting. It is a screen and core dementia battery, not a comprehensive evaluation, and it contains no executive, letter-fluency, or motor subtests.

1 – Measures and methods statement edition, form, norms, mode in one sentence

Do: name the edition (1998 or Update 2012), the form (A, B, C, D, or Spanish), the platform (paper, Q-interactive, Q-global), the mode, and the norm set used.

Pitfall: writing "the RBANS" with nothing else; form, norms, and mode each change what a score means.

2 – Behavioral observations and validity say how validity was assessed

Do: cover arousal, engagement, sensory barriers, then state the validity method; prefer a stand-alone validity measure in dementia populations.

Pitfall: applying an embedded effort cutoff to a memory-clinic patient; false-positive rates in genuine dementia are high.

3 – Index-by-index results five indexes, same order every time

Do: report Immediate Memory, Visuospatial/Constructional, Language, Attention, and Delayed Memory each with standard score and percentile, then describe the profile shape in prose.

Pitfall: burying a divergent index inside a reassuring average.

4 – Total Scale handling report once, interpret the indexes

Do: give the Total Scale once and judge index spread against published base rates; healthy adults show discrepancies too.

Pitfall: leading with a composite that describes no ability the patient actually has.

5 – Serial comparison change is a statistic, not a subtraction

Do: name the interval and alternate form, then report reliable change or SRB results; state whether change clears the threshold.

Pitfall: calling raw point movement improvement or decline; measurement error and practice both move scores.

6 – Domains not assessed and limits the screen states its own scope

Do: state that executive function, letter fluency, and motor skills were not assessed, and that findings inform whether comprehensive assessment is warranted.

Pitfall: silence about scope, which invites over-reading a normal Total Scale.

7 – Impression and recommendations route the diagnosis, do not make it here

Do: tie the profile to the referral question and collateral report, and let each recommendation trace to a documented finding.

Pitfall: a screening profile carrying a diagnosis on its own.

Before you sign

- ☐ Edition, form, platform, mode, norms named
- ☐ Indexes reported individually; profile leads
- ☐ Validity method stated; stand-alone in dementia
- ☐ Change reported as RCI or SRB, form named
- ☐ Absent domains stated; screen boundary explicit
- ☐ Recommendations trace to findings and collateral

Drafting with AI

Paste your score summary: edition, form, index scores, observations. Not the items, not the record form.

"Draft a RBANS results section from this summary: RBANS Update, Form A; Immediate Memory 78, Visuospatial 98, Language 96, Attention 88, Delayed Memory 75, Total 84; age 74, memory-clinic screen; ..."

Never paste client-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

250–600 words
RBANS section

~30 minutes
administration

Ages 12–89
mean 100, SD 15

Four forms
built to repeat

RBANS Results Section Template

Copy or print for your practice - Adapt fields to your organization's, payer's and jurisdiction's documentation requirements.

Client (initials): _____ Age: _____ Testing date: _____

Edition and form: _____ Platform and mode: _____ Norm set used: _____

Measures and methods statement

Why the RBANS fits the referral question; edition, form, platform, mode, and norms stated

Behavioral observations and validity

Arousal, engagement, sensory or motor barriers; how performance validity was assessed

Index-by-index results

Immediate Memory, Visuospatial/Constructional, Language, Attention, Delayed Memory (mean 100, SD 15) with percentiles; profile shape in prose

Total Scale handling

Reported once; index spread judged against base rates, composite carries no diagnosis

Serial comparison (retest only)

Interval, alternate form, prior scores; reliable change or SRB result, not raw differences

Domains not assessed and limits

No executive, letter-fluency, or motor subtests; screen boundary and what remains open

Impression and recommendations

Profile tied to referral and collateral; each recommendation traces to a finding; referral routing stated

Re-evaluation plan (interval, alternate form): _____ Report due: _____

Evaluator signature / credentials: _____ Date signed: _____

Supervisor signature, where required: _____ Date: _____