

About The NeuroCognitive & Behavioral Institute

Established in 1994, The NeuroCognitive & Behavioral Institute (formerly The NeuroCognitive Institute) is committed to its scientist-practitioner model which requires its clinicians to remain actively involved in neuroscience research. Over the past two decades, NCBI has become one of the premiere centers in New Jersey for the diagnosis and treatment of cognitive and related neurobehavioral and neuropsychiatric disorders. The team consists of clinical and cognitive neuropsychologists, cognitive and behavioral neurologists, clinical psychologists, neuropsychiatrists, cognitive and speech and language therapists, as well as, behaviorists, psychotherapists and neuromodulation clinicians.

Locations

Morris County:

111 Howard Blvd., Suites 204-205, Mt. Arlington, NJ 07856 (Primary Location)

Somerset County:

2345 Lamington Road, Suite 110, Bedminster, NJ 07921

Essex County:

Barnabas Health Ambulatory Care Center, Suite 270, 200 South Orange Avenue, Livingston, NJ 07039

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THE NEUROCOGNITIVE & BEHAVIORAL INSTITUTE

Integrating Science with Practice

ADHD | Autism | Brain Injury | Cognitive Impairment | Mood and Behavioral Disorders



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Psychiatric Assessments and Mental Health Treatments

Results from psychological testing, brain imaging and pharmacogenetics guide treatment decisions.

- Dr. Gerald Tramontano, Medical Director

Mental Health and Psychiatric Services

Psychiatric Assessment



The goal of psychiatric exams and clinical psychological testing is to identify the cause of each patient's neuropsychiatric symptoms and disorders. For example, to determine if a patient's mood disorder is due to dysthymia or major depression; or to differentiate a bipolar spectrum disorder vs. a trait-based condition such as borderline personality disorder.

Accurately identifying the etiology determines the best treatment option which increases the likelihood of a positive outcome. These diagnostic procedures are always combined with a comprehensive developmental, social and medical history, as well as, a neurological examination to enhance the probability of making an accurate diagnosis or diagnoses.

Neuroimaging

Additionally, at NCBI we use electrical neuroimaging to assess if a patient is a candidate for pharmacological interventions with stimulants or anti-depressants. Functional brain mapping using electrical neuroimaging and fMRI are routinely used to identify neuromarkers for neuropsychiatric conditions such as major depression, sympathetic over-arousal disorders such as OCD, PTSD, generalized anxiety and panic attacks, Tourette's syndrome, as well as schizophreniform disorders.

Biological Testing

Assessing levels of neurotransmitters are typically included in our psychiatric assessment, as well as, neuroendocrine and micronutrient laboratory testing.

Pharmacogenetics

We also use pharmacogenetic testing to determine how each patient's genes break down and metabolize psychotropic medications allowing the prescribing clinician to avoid medications that are likely to cause side-effects and to determine when higher dosages of a medication will be required to obtain a therapeutic effect.

Dose Optimization and Efficacy Testing

Once the correct medication is identified, such as a specific stimulant, we routinely use dose optimization testing to find the optimal stimulant dose or dosages across both low and high stimulating conditions.

Similarly – all of our mental health treatments are followed by efficacy testing.

Mental Health Treatments

Psychotherapy

Psychotherapy is a core mental health treatment offered at NCBI. There are hundreds of different types of psychological therapies, but in general they can be broken down into two major categories: cognitive behavioral and the psychodynamic based therapies. Although there is a significant



amount of overlap, Cognitive Behavioral Therapy (CBT) tends to focus on identifying and changing cognitions and behaviors that are thought to be causing or contributing to a patient's psychiatric disorder. Psychodynamic therapies tend to focus more on bringing into the patient's awareness unconscious defense or coping mechanisms that are actually contributing to the patient's distress instead of protecting the patient.

Neuromodulation

At NCBI, we also use non-invasive neuromodulation treatment applications such as transcranial direct/alternating current stimulation (tDCS/tACS) to treat various neuropsychiatric disorders. For instance, in some patients with mood and impulse control disorders, regulatory regions of the cortex respond inadequately to effectively modulate a patient's mood symptoms and impulsivity. Interventions such as tDCS and tACS can enhance these regulatory hubs improving a patient's capacity to self-regulate. Some of these interventions are available only through research and others have been FDA approved to treat certain disorders.

Psychopharmacology

Some of our clinicians at NCBI specialize in the use of psychotropic medications in to treatment mood and behavioral disorders, as well as, psychosis.

Other Medical Devices

Devices to treat panic attacks and insomnia such as FreeSpira and ebb are routinely used by NCBI clinicians as adjunctive treatments for the treatment of common neuropsychiatric symptoms.