### Availability:
Please visit this website for more information about the instrument:
- **Rey Auditory Verbal Learning Test**.

### Classification:
- **Basic**: Acute Hospitalized Traumatic Brain Injury, Moderate/Severe Traumatic Brain Injury and Concussion/Mild Traumatic Brain Injury
- **Supplemental**: Cerebral Palsy, Epilepsy, Multiple Sclerosis (MS), Sports-Related Concussion (SRC) Persistent/Chronic (3 months and greater post concussion) and Epidemiology Traumatic Brain Injury (TBI)
- **Exploratory**: Unruptured Cerebral Aneurysms and Subarachnoid Hemorrhage (SAH) and Sports-Related Concussion (SRC) Acute (time of injury until 72 hours) and Subacute (after 72 hours to 3 months)

### Short Description of Instrument:
Originally developed in the 1940s, the RAVLT has evolved over the years, and several variations of the test have emerged. The standard RAVLT format starts with a list of 15 words, which an examiner reads aloud at the rate of one per second. The patient's task is to repeat all the words he or she can remember, in any order. This procedure is carried out a total of five times. Then the examiner presents a second list of 15 words, allowing the patient only one attempt at recall. Immediately following this, the patient is asked to remember as many words as possible from the first list.

The RAVLT has proven useful in evaluating verbal learning and memory, including proactive inhibition, retroactive inhibition, retention, encoding versus retrieval, and subjective organization. Because the test is brief, straightforward, easy to understand, and appropriate for both children and adults (ages 7 through 89), it has gained widespread acceptance. However, until now, data about the RAVLT-norms, validity studies, different administration and scoring procedures-have been scattered in various sources.

### Epilepsy Specific Information:
The RAVLT is a verbal learning test that has been used widely, both in North American and in Europe, as well as Australia (Weintrob, 2007). In addition, a Spanish version is available (WHO-UCLA AVLT). It is structured in the same format as the CVLT (5 learning trials, distracter trial, and immediate and delayed recall of initial list), but consists of words that are not semantically related.

### TBI Specific Information/Comments:
This is a performance based measure which requires the subject to understand what is required and participate in the testing. It requires a functional level in the severe disability or above on the GOS/GOSE.

### Sports-Related Concussion Specific Comments:
The RAVLT has proven useful in evaluating verbal learning and memory, including proactive inhibition, retroactive inhibition, retention, encoding versus retrieval, and subjective organization. Because the test is brief, straightforward, easy to understand, and appropriate for both children and adults (aged 7 through 89), it has gained widespread acceptance. Advantages: include costs (in the public domain). The RAVLT has been translated into multiple languages including Spanish (Los Angeles Auditory Verbal Learning Test), which
facilitates its use across a wider segment of the population not only in the US, but to compare across studies from other nations. The RAVLT has been widely used to characterize verbal memory in epilepsy patient series.

The primarily disadvantage of the RAVLT is its normative information, with a variety of “norms” appearing in different contexts. Although meta-norms are available, the norms were not obtained in a systematic fashion such as with tests from formal test publishers.

Age Range: 7–89 years

Rationale / Justification:

The advantages of the RAVLT include costs (in the public domain) and its purported greater sensitivity than the CVLT to lateralized temporal lobe seizure onset. The RAVLT has been translated into multiple languages including Spanish (Los Angeles Auditory Verbal Learning Test), which facilitates its use across a wider segment of the population not only in the US, but to compare across studies from other nations. The RAVLT has been widely used to characterize verbal memory in epilepsy patient series.

The primarily disadvantage of the AVLT is its normative information, with a variety of “norms” appearing in different contexts. Although meta-norms are available, the norms were not obtained in a systematic fashion such as with tests from formal test publishers.

There is no universally agreed upon recognition format for the procedure. The committee has selected one to permit consistency across studies, although there are also discussions to create a new recognition form due to certain limitations of current recognition approaches.

This measure has good psychometric properties, is widely used, translated into multiple languages, has multiple forms, and is in the public domain. It is a legacy measure for the NIH Toolbox Episodic Memory subdomain.

References:


mTBI:


**Sport-Related Concussion:**
