## NICHQ Vanderbilt Assessment Scale—PARENT Informant Today's Date: \_\_\_\_ Child's Name: \_\_\_\_ Date of Birth: \_\_\_\_\_ Parent's Name: \_\_\_\_ Parent's Phone Number: \_\_\_\_\_ Directions: Each rating should be considered in the context of what is appropriate for the age of your child. When completing this form, please think about your child's behaviors in the past 6 months. Is this evaluation based on a time when the child \_\_\_ was on medication \_\_\_ was not on medication \_\_\_ not sure?

Symptoms	Never	Occasionally	Often	Very Often
<ol> <li>Does not pay attention to details or makes careless mistakes with, for example, homework</li> </ol>	0	1	2	3
2. Has difficulty keeping attention to what needs to be done	0	1	2	3
3. Does not seem to listen when spoken to directly	0	1	2	3
<ol> <li>Does not follow through when given directions and fails to finish activities (not due to refusal or failure to understand)</li> </ol>	0	1	2	3
5. Has difficulty organizing tasks and activities	0	1	2	3
<ol> <li>Avoids, dislikes, or does not want to start tasks that require ongoing mental effort</li> </ol>	0	1	2	3
<ol><li>Loses things necessary for tasks or activities (toys, assignments, pencils, or books)</li></ol>	0	1	2	3
8. Is easily distracted by noises or other stimuli	0	1	2	3
9. Is forgetful in daily activities	0	1	2	3
10. Fidgets with hands or feet or squirms in seat	0	1	2	3
11. Leaves seat when remaining seated is expected	0	1	2	3
12. Runs about or climbs too much when remaining seated is expected	0	1	2	3
13. Has difficulty playing or beginning quiet play activities	0	1	2	3
14. Is "on the go" or often acts as if "driven by a motor"	0	1	2	3
15. Talks too much	0	1	2	3
16. Blurts out answers before questions have been completed	0	1	2	3
17. Has difficulty waiting his or her turn	0	1	2	3
18. Interrupts or intrudes in on others' conversations and/or activities	0	1	2	3
19. Argues with adults	0	1	2	3
20. Loses temper	0	1	2	3
21. Actively defies or refuses to go along with adults' requests or rules	0	1	2	3
22. Deliberately annoys people	0	1	2	3
23. Blames others for his or her mistakes or misbehaviors	0	1	2	.3
24. Is touchy or easily annoyed by others	0	1	2	3
25. Is angry or resentful	0	1	2	3
26. Is spiteful and wants to get even	0	1	2	3
27. Bullies, threatens, or intimidates others	0	1	2	3
28. Starts physical fights	0	1	2	3
29. Lies to get out of trouble or to avoid obligations (ie, "cons" others)	0	1	2	3
30. Is truant from school (skips school) without permission	0	1	2	3
31. Is physically cruel to people	0	1	2	3
32. Has stolen things that have value	0	1	2	3

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

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Adapted from the Vanderbilt Rating Scales developed by Mark L. Wolraich, MD. Revised - 1102

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## NICHQ Vanderbilt Assessment Scale—PARENT Informant

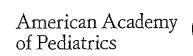
l'oday's Date:	Child's Name:	· · · · · · · · · · · · · · · · · · ·	Date of Birth:
Parent's Name:		Parent's Phone Number:	

Symptoms (continued)	Never	Occasionally	Often	Very Often
33. Deliberately destroys others' property	0	1	2	3
34. Has used a weapon that can cause serious harm (bat, knife, brick, gun)	0	1	2	3
35. Is physically cruel to animals	0	1	2	3
36. Has deliberately set fires to cause damage	0	1	2	3
37. Has broken into someone else's home, business, or car	0	1	2	3
38. Has stayed out at night without permission	0	1	2	3
39. Has run away from home overnight	0	1	2	3
40. Has forced someone into sexual activity	0	1	2	3
41. Is fearful, anxious, or worried	0	1	2	3
42. Is afraid to try new things for fear of making mistakes	0	1	2	3
43. Feels worthless or inferior	0	1	2	3
44. Blames self for problems, feels guilty	0	1	2	3
45. Feels lonely, unwanted, or unloved; complains that "no one loves him or her	" 0	1	2	3
46. Is sad, unhappy, or depressed	0	1	2	3
47. Is self-conscious or easily embarrassed	0	1	2	3

			Somewhat			
Performance	Excellent	Above Average	Average	of a Problem	Problematic	
48. Overall school performance	1	2	3	4	5	
49. Reading	1	2	3	4	5	
50. Writing	1	2	3	4	5	
51. Mathematics	1	2	3	4	5	
52. Relationship with parents	1	2	3	4	5	
53. Relationship with siblings	1	2	3	4	5	
54. Relationship with peers	1	2	3	4	5	
55. Participation in organized activities (eg, teams)	1	2	3	· 4	5	

Comments:

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Total number of questions scored 2 or 3 in questions 1-9:
Total number of questions scored 2 or 3 in questions 10–18:
Total Symptom Score for questions 1–18:
Total number of questions scored 2 or 3 in questions 19-26:
Total number of questions scored 2 or 3 in questions 27-40:
Total number of questions scored 2 or 3 in questions 41-47:
Total number of questions scored 4 or 5 in questions 48-55:
Average Performance Score:







D5	NICHQ Vanderbilt Assessment Follow-up	PAREN	IT Informant		
Today	r's Date: Child's Name:		Date o	f Birth:	
Paren	t's Name: Paren	t's Phone N	ſumber:		
	tions: Each rating should be considered in the context of what is a about your child's behaviors since the last assessment scale s evaluation based on a time when the child    □ was on medicat	was filled	out when rating	j his/her b	ehaviors.
Syı	mptoms	Never	Occasionally	Often	Very Often
	Does not pay attention to details or makes careless mistakes with, for example, homework	0	1	2	3
2.	Has difficulty keeping attention to what needs to be done	0	l	2	3
3.	Does not seem to listen when spoken to directly	0	1	2	3
4.	Does not follow through when given directions and fails to finish activities (not due to refusal or failure to understand)	0	1	2	3
5.	Has difficulty organizing tasks and activities	0	l	2	3
6.	Avoids, dislikes, or does not want to start tasks that require ongoing mental effort	0	1	2	3
7.	Loses things necessary for tasks or activities (toys, assignments, pencils, or books)	0	1	2	3
8.	Is easily distracted by noises or other stimuli	0	1	2	3
9.	Is forgetful in daily activities	0	1	2	3
10.	Fidgets with hands or feet or squirms in seat	0	1	2	3
11.	. Leaves seat when remaining seated is expected	0	1	2	3
12.	Runs about or climbs too much when remaining seated is expected	0	1	2	3
13	. Has difficulty playing or beginning quiet play activities	0	1	2	3
14	. Is "on the go" or often acts as if "driven by a motor"	0	1	2	3
15	. Talks too much	0	1	2	3
16	Blurts out answers before questions have been completed	0	1	2	3

		Above		Somewhat of a		
Performance	Excellent	Average	Average	Problem	Problematic	
19. Overall school performance	1	2	3	4	5	
20. Reading	1	2	3	4	5	
21. Writing	1	2	3	4	5	
22. Mathematics	1	2	3	4	5	
23. Relationship with parents	1	2	3	4	5	
24. Relationship with siblings	1	2	3	4	5	
25. Relationship with peers	1	2	3	4	5	
26. Participation in organized activities (eg, teams)	1	2	3	4	5	

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Adapted from the Vanderbilt Rating Scales developed by Mark L. Wolraich, MD. Revised - 0303  $\,$ 

1

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18. Interrupts or intrudes in on others' conversations and/or activities





17. Has difficulty waiting his or her turn

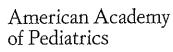
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D5 NICHQ Vanderbilt Assessment Follow-up—PARENT Informant, continued						
Today's Date: Child's Name:		Date	of Birth:			
·						
Side Effects: Has your child experienced any of the following side effects or problems in the past week?	Are these None	side effec Mild	ts currently a p	oroblem? Severe		
Headache						
Stomachache						
Change of appetite—explain below						
Trouble sleeping						
Irritability in the late morning, late afternoon, or evening—explain below						
Socially withdrawn—decreased interaction with others						
Extreme sadness or unusual crying						
Dull, tired, listless behavior						
Tremors/feeling shaky	,					
Repetitive movements, tics, jerking, twitching, eye blinking—explain below						
Picking at skin or fingers, nail biting, lip or cheek chewing—explain below						
Sees or hears things that aren't there						

## **Explain/Comments:**

	`	 
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Total Symptom Score for questions 1-18:		 
Average Performance Score for questions 19–26:		 

Adapted from the Pittsburgh side effects scale, developed by William E. Pelham, Jr, PhD.





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