D5	NICHQ Vanderbilt Assessment Follow-u	p—PAREN	IT Informant					
Toda	y's Date: Child's Name:		Date o	f Birth:				
Parer	nt's Name: Paren	Parent's Phone Number:						
	ctions: Each rating should be considered in the context of what is about your child's behaviors since the last assessment scale is evaluation based on a time when the child	e was filled	out when rating	g his/her k	ehaviors.			
Sy	mptoms	Never	Occasionally	Often	Very Often			
1.	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	1	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	1	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			

	Above			Somewhat of a Select		
Performance	Excellent	Average	Average	Problem	Problematic Answer	
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	

0

0

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.

16. Blurts out answers before questions have been completed

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

17. Has difficulty waiting his or her turn

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

1

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2

2

2

3

3

3

Select Answer

D5 NICHQ Vanderbilt Assessment Follow-up—PAR	ENT Inforn	nant, cont	inued			
Today's Date: Child's Name:		Date	of Birth:			
Parent's Name: Parent's	t's Phone Number:					
Side Effects: Has your child experienced any of the following side	Are these	ts currently a p	tly a problem?			
effects or problems in the past week?	None	Mild	Moderate	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:

For Office Use Only
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.







Scoring Instructions for the NICHQ Vanderbilt Assessment Scales

These scales should NOT be used alone to make any diagnosis. You must take into consideration information from multiple sources. Scores of 2 or 3 on a single Symptom question reflect *often-occurring* behaviors. Scores of 4 or 5 on Performance questions reflect problems in performance.

The initial assessment scales, parent and teacher, have 2 components: symptom assessment and impairment in performance. On both the parent and teacher initial scales, the symptom assessment screens for symptoms that meet criteria for both inattentive (items 1–9) and hyperactive ADHD (items 10–18).

To meet *DSM-IV* criteria for the diagnosis, one must have at least 6 positive responses to either the inattentive 9 or hyperactive 9 core symptoms, or both. A positive response is a 2 or 3 (often, very often) (you could draw a line straight down the page and count the positive answers in each subsegment). There is a place to

record the number of positives in each subsegment, and a place for total score for the first 18 symptoms (just add them up).

The initial scales also have symptom screens for 3 other comorbidities—oppositional-defiant, conduct, and anxiety/depression. These are screened by the number of positive responses in each of the segments separated by the "squares." The specific item sets and numbers of positives required for each co-morbid symptom screen set are detailed below.

The second section of the scale has a set of performance measures, scored 1 to 5, with 4 and 5 being somewhat of a problem/problematic. To meet criteria for ADHD there must be at least one item of the Performance set in which the child scores a 4 or 5; ie, there must be impairment, not just symptoms to meet diagnostic criteria. The sheet has a place to record the number of positives (4s, 5s) and an Average Performance Score—add them up and divide by number of Performance criteria answered.

Parent Assessment Scale

Predominantly Inattentive subtype

- Must score a 2 or 3 on 6 out of 9 items on questions 1–9 AND
- Score a 4 or 5 on any of the Performance questions 48–55

Predominantly Hyperactive/Impulsive subtype

- Must score a 2 or 3 on 6 out of 9 items on questions 10–18 AND
- Score a 4 or 5 on any of the Performance questions 48–55

ADHD Combined Inattention/Hyperactivity

 Requires the above criteria on both inattention and hyperactivity/impulsivity

Oppositional-Defiant Disorder Screen

- Must score a 2 or 3 on 4 out of 8 behaviors on questions 19–26 AND
- Score a 4 or 5 on any of the Performance questions 48–55

Conduct Disorder Screen

- Must score a 2 or 3 on 3 out of 14 behaviors on questions 27–40 <u>AND</u>
- Score a 4 or 5 on any of the Performance questions 48–55

Anxiety/Depression Screen

- Must score a 2 or 3 on 3 out of 7 behaviors on questions 41–47
- Score a 4 or 5 on any of the Performance questions 48–55

Teacher Assessment Scale

Predominantly Inattentive subtype

- Must score a 2 or 3 on 6 out of 9 items on questions 1–9 <u>AND</u>
- Score a 4 or 5 on any of the Performance questions 36–43

Predominantly Hyperactive/Impulsive subtype

- Must score a 2 or 3 on 6 out of 9 items on questions 10–18 AND
- Score a 4 or 5 on any of the Performance questions 36–43

ADHD Combined Inattention/Hyperactivity

 Requires the above criteria on both inattention and hyperactivity/impulsivity

Oppositional-Defiant/Conduct Disorder Screen

- Must score a 2 or 3 on 3 out of 10 items on questions 19–28 AND
- Score a 4 or 5 on any of the Performance questions 36–43

Anxiety/Depression Screen

- Must score a 2 or 3 on 3 out of 7 items on questions 29–35 AND
- Score a 4 or 5 on any of the Performance questions 36–43

The parent and teacher follow-up scales have the first 18 core ADHD symptoms, not the co-morbid symptoms. The section segment has the same Performance items and impairment assessment as the initial scales, and then has a side-effect reporting scale that can be used to both assess and monitor the presence of adverse reactions to medications prescribed, if any.

Scoring the follow-up scales involves only calculating a total symptom score for items 1–18 that can be tracked over time, and

the average of the Performance items answered as measures of improvement over time with treatment.

Parent Assessment Follow-up

- Calculate Total Symptom Score for questions 1–18.
- Calculate <u>Average</u> Performance Score for questions 19–26.

Teacher Assessment Follow-up

- Calculate <u>Total</u> Symptom Score for questions 1–18.
- Calculate <u>Average</u> Performance Score for questions 19–26.

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The recommendations in this publication do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.





