

ASSOCIATED NEUROLOGICAL SPECIALTIES

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ADD Rating Scale

Date: _____

Child's Name: _____ Sex: _____ Age: _____

Completed By: _____

	Not True	Somewhat or Sometimes True	Very or Often True
1. Fails to finish things he/she starts			
2. Can't concentrate; can't pay attention for long			
3. Can't sit still; restless or hyperactive			
4. Fidgets			
5. Daydreams or gets lost in his/her thoughts			
6. Impulsive or acts without thinking			
7. Difficulty following instructions			
8. Talks out of turn			
9. Messy work			
10. Inattentive or easily distracted			
11. Talks too much			
12. Fails to carry out assigned tasks			

COMMENTS REGARDING CHANGES IN BEHAVIOR PATTERN:

Please Rate.

0 = Not a problem

1 = Mild

2 = Moderate

3 = Severe

Learning Skills:

- _____ Reading
- _____ Writing
- _____ Spelling
- _____ Qualitative Reasoning
- _____ Math Calculating
- _____ Processing Speed
- _____ Memorizing
- _____ Concentrating
- _____ Listening
- _____ Other: _____

Please check all ADD symptoms listed that the patient exhibits:

- _____ Often fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities.
- _____ Often has difficulty sustaining attention in tasks or play activities.
- _____ Often does not seem to listen when spoken to directly.
- _____ Often does not follow through on instructions and details to finish schoolwork, chores, or duties intermittent eh workplace (not due to oppositional behavior or failure to understand instructions).
- _____ Often has difficulty organizing tasks and activities.
- _____ Often avoids, dislikes, or is reluctant to engage in tasks (such as schoolwork or homework) that required sustained mental effort.
- _____ Often loses things necessary for task and activities (e.g. school assignments, pencils, books, tools, etc.)
- _____ Often easily distracted by extraneous stimuli.
- _____ Often forgetful in daily activities.

Hyperactivity symptoms:

- _____ Often fidgets with hands or feet or squirms in seat.
- _____ Often leaves (or greatly feels the need to leave) seat in classroom or in other situations in which remaining seated is expected.
- _____ Often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, may be limited to subjective feelings of restlessness).
- _____ Often has difficulty playing or engaging in leisure activities that are more sedate.
- _____ Often talks excessively.

Impulsivity Symptoms:

- _____ Often blurts out answers before questions have been completed.
- _____ Often has difficulty waiting turn.
- _____ Often interrupts or intrudes on others (e.g. butts into conversations or games)