NICHQ Vanderbilt Assessment Scale – PARENT Informant*

Toda	ay's Date:Child's Name:	Date of Birth:							
Pare	ent's Name:Parent's Pho	Parent's Phone Number:							
Dire	ctions: Each rating should be considered in the context of what is appropriate form, please think about your child's behaviors in the past <u>6 months</u> .	for the ag	e of your child.	When co	mpleting this				
Is this evaluation based on a time when the child \square was on medication \square was not on medication \square not sure?									
-	Symptoms	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				
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				
	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				
_	Starts physical fights	0	1	2	3				
29.	Lies to get out of trouble or to avoid obligations (i.e. "cons" others)	0	1	2	3				
30.		0	1	2	3				
31.	Is physically cruel to people	0	1	2	3				
	Has stolen things that have value	0	1	2	3				
33.		0	1	2	3				
34.		0	1	2	3				
	Is physically cruel to animals	0	1	2	3				
	Has deliberately set fires to cause damage	0	1	2	3				

NICHQVanderbiltParent,20050602

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Today's Date: Child's Name: Parent's Name:		Date of Birth:						
		Parent's Phone Numbe <u>r:</u>						
	Symptoms		Never	Occasionally	Often	Very Often		
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	n 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		
			Above		Somewhat of a			
	Performance	Excellent	Average	Average	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		

Comments:

55 Participation in organized activities (e.g. teams)

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: _____

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