



Vanderbilt ADHD Diagnostic PARENT Rating Scale

Student's Name: _____ Date of Birth: _____

Parent Name: _____

Each rating should be considered in the context of what is appropriate for the age of the children you are rating.

Frequency code: 0 = NEVER; 1 = OCCASIONALLY; 2 = OFTEN; 3 = VERY OFTEN

1. Does not pay attention to details or makes careless mistakes (homework)	0	1	2	3
2. Has difficulty attending 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	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 needed for tasks or activities (assignments, pencils, or books)	0	1	2	3
8. Is easily distracted by noises or other things	0	1	2	3
9. Is forgetful in daily activities	0	1	2	3
10. Fidgets with hands or feet; squirms in seat	0	1	2	3
11. Leaves seat when he/she is supposed to stay seated	0	1	2	3
12. Runs about or climbs too much when he/she is supposed to stay seated	0	1	2	3
13. Has difficulty playing or starting quiet games	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/her turn	0	1	2	3
18. Interrupts or bothers others when talking or playing games	0	1	2	3



19. Argues with adults	0	1	2	3
20. Loses temper	0	1	2	3
21. Actively disobeys or refuses to follow an adults' requests or rules	0	1	2	3
22. Bothers people on purpose	0	1	2	3
23. Blames others for his/her mistakes or misbehaves	0	1	2	3
24. Is touchy or easily annoyed by others	0	1	2	3
25. Is angry or bitter	0	1	2	3
26. Is hateful and wants to get even	0	1	2	3

27. Bullies, threatens, or scares others	0	1	2	3
28. Starts physical fights	0	1	2	3
29. Lies to get out of trouble or to avoid jobs (cons others)	0	1	2	3
30. Skips school without permission	0	1	2	3
31. Is physically unkind to people	0	1	2	3
32. Has stolen things that have value	0	1	2	3
33. Destroys others' property on purpose	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 mean to animals	0	1	2	3
36. Has set fires on purpose 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, nervous, or worried	0	1	2	3
42. Is afraid to try new things for fear of making mistakes	0	1	2	3
43. Feels useless or inferior	0	1	2	3
44. Blames self for problems, feels at fault	0	1	2	3
45. Feels lonely, unwanted, or unloved; complains that "no one loves him/her"	0	1	2	3
46. Is sad or unhappy	0	1	2	3
47. Feels different and easily embarrassed	0	1	2	3

Performance

	Above Average		Average		Problematic
48. How is your child's 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. How does your child get along with you?	1	2	3	4	5
53. How does your child get along with brothers and sisters?	1	2	3	4	5
54. How does your child get along with others his/her own age?	1	2	3	4	5
55. How does your child do in activities such as games or team play?	1	2	3	4	5

Please fax completed form to Pathway Pediatrics:
SYLACAUGA: 256-208-0755 CHELSEA: 205-618-9696