

## **ADHD Checklist Instructions**

### **Scoring Instructions**

The ADHD Checklist is a list of the nine DSM items of attention and the nine DSM items of hyperactivity/impulsivity. Attention and impulsive-hyperactive items are grouped together so that the clinician can easily differentiate with a glance which area is primarily impaired. The number of items rated pretty much (2) or very much (3) are an indication that these areas are clinically problematic. Add up the numbers of clinically significant items and determine whether the client has met the threshold which is stated in next to the section heading (e.g. Attention > 6/9). If physicians are suspect but are unsure of whether ADHD is a possibility, the Checklist can be completed in the waiting room prior to assessment.

### **Comparison to Other Scales**

The items are also almost identical to those of the SNAP-IV scale, with the exception that the statement "Often ..." and then rating frequency as sometimes, often or very often has been deleted. Items have also been made generic enough to be appropriate to all age groups and so that they can be completed by any informant and for the past or present. The correlation between the DSM-IV checklists is very high (>.8). Therefore, if a clinician wishes to use an alternative checklist, the rating of number of positive items can be entered into the assessment form in the same way, noting the checklist used.

### **If Only ADHD**

The items on the ADHD Checklist are identical with the attention, hyperactive, and oppositional items at the beginning of the Weiss Symptom Record. This is so that the WSR can be given at baseline, but if the primary disorder is ADHD, follow-up assessments can be done by just using the Checklist and allowing for comparison.

### **The Checklist Used by Other Informants**

The Checklist can also be completed to identify ADHD in adults in childhood, or completed by a collateral informant as well as the patient.