

limited to feeling restless.)

Often unable to play or engage in leisure activities quietly.

Medical Documentation: Attention Deficit Hyperactive Disorder (ADHD)

Student:				ID:	Date:	
Scł	School:			Grade:	DOB:	
Diı	rectio	ns: P	lease indicate the diagnostic criteria t	that are indicated by your ev	aluation.	
			Diagnostic Criteria for A	ttention-Deficit/Hyperacti	vity Disorder (DSM-V)	
A.			nt pattern of inattention and/or hyperazed by (1) and/or (2):	activity-impulsivity that inte	erferes with functioning or development, as	
	1.	Inattention: Six (or more) of the following symptoms have persisted for at least 6 months to a degree that is inconsistent with developmental level and that impacts directly on social and academic/occupational activities. Note: The symptoms are not solely a manifestation of oppositional behavior, defiance, hostility, or failure to understand tasks or instructions. For older adolescents and adults (e.g., ages 17 and older), at least 5 symptoms are required.				
			Often fails to give close attention to activities (e.g., overlooks or misses		nistakes in schoolwork, at work, or during other	
			Often has difficulty sustaining atter lectures, conversations, or lengthy		es (e.g., has difficulty remaining focused during	
			Often does not seem to listen when obvious distraction).	spoken to directly (e.g., min	nd seems elsewhere, even in the absence of any	
			Often does not follow through on in (e.g., starts tasks but quickly loses to		n schoolwork, chores, or duties in the workplace ed).	
					ulty managing sequential tasks; difficulty d work; has poor time management; fails to meet	
					quire sustained mental effort (e.g., schoolwork or completing forms, reviewing lengthy papers).	
			Often loses things necessary for tas paperwork, eyeglasses, mobile telep		materials, pencils, books, tools, wallets, keys,	
			Is often easily distracted by extrane thoughts).	eous stimuli (for older adoles	scents and adults, may include unrelated	
			Is often forgetful in daily activities returning calls, paying bills and kee		ning errands; for older adolescents and adults,	
	2.	degractive Note under	peractivity and Impulsivity: Six (or see that is inconsistent with developmenties. The symptoms are not solely a managerstand tasks or instructions. For older	more) of the following symplental level and that impacts mifestation of oppositional be	ptoms have persisted for at least 6 months to a directly on social and academic/occupational ehavior, defiance, hostility, or failure to ges 17 and older), at least 5 symptoms are	
		requ	ired. Often fidgets with or taps hands or	feet or squirms in seat.		
			Often leaves seat in situations wher classroom, in the office or other wo		red (e.g., leaves his or her place in the ns that require remaining in place).	

Often runs about or climbs in situations where it is inappropriate. (Note: In adolescents or adults, may be

Print na	ıme:		Phone:			
(Requir	red)		Date:			
	Licen	cal Doctor used Psychologist unced Practice Nurse				
Signatu						
	.1113.					
Comm	seve	ere, and are present, or the symptoms result in marked				
	Severe: Many symptoms in excess of those required to make the diagnosis, or several symptoms that are particularly					
П		te than minor impairments in social or occupational funderate: Symptoms or functional impairment between	-			
	l of Severity Mild: Few, if any symptoms in excess of those required to make the diagnosis are present, and symptoms result in n					
Level 4		•	nai, academic, or occupational functioning.			
	In Partial remission: When full criteria were previously met, fewer than the full criteria have been met for the past 6 months, and the symptoms still result in impairment in social, academic, or occupational functioning.					
	 Predominately Inattentive Presentation: If Criterion A1 (Inattention) is met but Criterion A2 (Hyperactivity-Impulsivity) is not met for the past 6 months. Predominately Hyperactive-Impulsive Presentation: If Criterion A2 (Hyperactivity-Impulsivity) is met but Criterion A1 (Inattention) is not met for the past 6 months. 					
	the p	Combined Presentation: If both Criterion A1 (Inattention) and Criterion A2 (Hyperactivity-Impulsivity) are met for the past 6 months.				
		d on Current Presentation:				
Е. 🗆	-					
D. 🗖	There is clear evidence that the symptoms interfere with, or reduce the quality of, social, academic, or occupation functioning.					
C. 🗖	Several inattentive or hyperactive-impulsive symptoms are present in two or more settings (e.g., at home, schoo work; with friends or relatives; in other activities).					
В. 🔲	Seve	Several inattentive or hyperactive-impulsive symptoms were present prior to age 12 years.				
		1	o conversations, games, or activities; may start using other on; for adolescents and adults, may intrude into or take			
		Often has difficulty waiting his or her turn (e.g. whi	le waiting in line).			
		Often blurts out an answer before question has been for turn in conversation).	completed (e.g., completes people's sentences; cannot wait			
		Often talks excessively.				
		•	(e.g., is unable to be or uncomfortable being still for an xperienced by others as being restless or difficult to keep			