

A Survey From Your Healthcare Provider

| Name | Date | ID | |
|---|------------|----------------|------------|
| Please mark under the heading that best fits you or circle yes or no | Never 0 | Sometimes 1 | Often 2 |
| 1. Complain of aches or pains | | | |
| 2. Spend more time alone | | | |
| 3. Tire easily, little energy | | | |
| 4. Fidgety, unable to sit still | | | |
| 5. Have trouble with teacher | | | |
| 6. Less interested in school | | | |
| 7. Act as if driven by motor | | | |
| 8. Daydream too much | | | |
| 9. Distract easily | | | |
| 10. Are afraid of new situations | | | |
| 11. Feel sad, unhappy | | | |
| 12. Are irritable, angry | | | |
| 13. Feel hopeless | | | |
| 14. Have trouble concentrating | | | |
| 15. Less interested in friends | | | |
| 16. Fight with other children | | | |
| 17. Absent from school | | | |
| 18. School grades dropping | | | |
| 19. Down on yourself | | | |
| 20. Visit doctor with doctor finding nothing wrong | | | |
| 21. Have trouble sleeping | | | |
| 22. Worry a lot | | | |
| 23. Want to be with parent more than before | | | |
| 24. Feel that you are bad | | | |
| 25. Take unnecessary risks | | | |
| 26. Get hurt frequently | | | |
| 27. Seem to be having less fun | | | |
| 28. Act younger than children your age | | | |
| 29. Do not listen to rules | | | |
| 30. Do not show feelings | | | |
| 31. Do not understand other people's feelings | | | |
| 32. Tease others | | | |
| 33. Blame others for your troubles | | | |
| 34. Take things that do not belong to you | | | |
| 35. Refuse to share | | | |
| 36. During the past three months, have you thought of killing yourself? | | Yes | No |
| 37. Have you ever tried to kill yourself? | | Yes | No |

FOR OFFICE USE ONLY

Cutoff Scores for Interpretation:

I ≥ 5

E ≥ 7

A ≥ 7

TS _____

Q 36 or Q 37=Y TS ≥ 30

Plan for follow-up

Annual Screening
 Return visit w/ PCP
 Referred to counselor
 Parent declined
 Already in treatment
 Referred to other professional

Source: Pediatric Symptom Checklist – Youth Report (PSC-Y)