

## Adult ADHD Symptom Checklist

**Patient Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<b>For each item below, circle the answer that best describes your behavior in the last three months:</b> <b>0 = Not at all    1 = Just a Little    2 = Often    3 = Very Often</b>					
<b>Inattention Symptoms</b>					
1.	Fail to give attention to details or makes careless mistakes in work	0	1	2	3
2.	Have difficulty sustaining attention to tasks or activities	0	1	2	3
3.	Do not seem to listen when spoken to directly	0	1	2	3
4.	Do not follow through on instructions and fail to finish work (not due to refusal or failure to understand)	0	1	2	3
5.	Have difficulty organizing tasks or activities	0	1	2	3
6.	Avoid, dislike or am reluctant to engage in tasks that require sustained mental effort	0	1	2	3
7.	Lose things necessary for tasks or activities (e.g., assignments, books, cell phone, glasses, keys, wallet)	0	1	2	3
8.	Am distracted by extraneous stimuli	0	1	2	3
9.	Am forgetful in daily activities	0	1	2	3
<b>Hyperactive Symptoms</b>					
10.	Drumming fingers or bouncing legs while seated	0	1	2	3
11.	Difficulty sitting through long meetings or assemblies	0	1	2	3
12.	Moving in chair frequently during long meetings	0	1	2	3
13.	Have difficulty engaging in leisure activities quietly	0	1	2	3
14.	Am "on the go" or often act as if "driven by a motor"	0	1	2	3
15.	Talk excessively	0	1	2	3
<b>Impulsive Symptoms</b>					
16.	Blurt out answers before questions have been completed	0	1	2	3
17.	Have difficulty awaiting turn	0	1	2	3
18.	Interrupt or intrude on others (e.g., butts into conversations)	0	1	2	3
Approximately when did you notice these behaviors occur often or very often?					
Do these symptoms impair your functioning in two or more settings?                      Yes                      No					
Where is there impairment?    Family    School    Work    Social    (circle all)					