Integrated Psychiatry

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ADHD Questionnaire

Inattention

Do you often fail to give close attention to details or make careless mistakes in schoolwork, at work, or during other activities (ie. overlook or misses details, work is an accurate)?

Yes or no

Do you often have difficulty sustaining attention in tasks or play activities (ie. difficulty remaining focused during lectures, conversations, or lengthy reading)?

Yes or no

Do you often seem to not listen when spoken to directly (ie. mind somewhere else, even in the absence of obvious distraction)?

Yes or no

Do you often not follow through on instructions and fail to finish schoolwork, chores, or duties in the workplace (ie. start tasks but quickly loses focus and easily sidetracked)?

Yes or no

Do you often have difficulty organizing tasks and activities (ie. difficulty managing sequential tasks difficulty keeping materials and belongings in order; messy, disorganized work; difficulty with time management; fail to meet deadlines)?

Yes or no

Do you often avoid, dislike or are reluctant to engage in tasks that require sustained mental effort (ie. preparing reports, completing forms, reviewing lengthy papers)?

See back

Yes or no

Do you often lose things necessary for tasks or activities (ie. pencils, books, tools, wallet, keys, paperwork, eyeglasses, cell phone)?

Yes or no

Are you often easily distracted by extraneous stimuli (i.e. may include unrelated thoughts to the activity at hand)?

Yes or no

Are you often forgetful in daily activities (ie. doing chores, running errands, returning calls, paying bills, keeping appointments?

Yes or no

Hyperactivity/impulsivity Do you often fidget or tap hands/feet or squirming in your seat? Yes or no Do you often leave your seat in situations when remaining seating is expected (i.e. in the office or workplace or situations requiring remaining in place for more than 30 minutes)? Yes or no Do you easily feel restless at times? Yes or no Do you often talk excessively? Yes or no Do you often blurt out an answer before a question has been completed (ie. complete people's sentences, cannot wait for turn in conversation)? Yes or no Do you have difficulty waiting you return in line? Yes or no

Do you often interrupts or intrudes on others (i.e. conversations, games, activities; may start using other peoples things without asking or receiving permission; may intrude into or take over what others are doing)?

Yes or no