

NICHQ Vanderbilt Assessment Scale: Teacher Informant

Child's Name: _____

Child's Date of Birth: _____

Teacher's Name: _____

Today's Date: _____

Class Time: _____

Class Name/Period: _____

Grade Level: _____

Directions: Each rating should be considered in the context of what is appropriate for the age of the child you are rating and should reflect that child's behavior since the beginning of the school year. Please indicate the number of weeks or months you have been able to evaluate the behaviors: _____.

Symptoms	Never	Occasionally	Often	Very Often
----------	-------	--------------	-------	------------

1. Fails to give attention to details or makes careless mistakes in schoolwork				
--	--	--	--	--

2. Has difficulty sustaining attention to tasks or activities				
---	--	--	--	--

3. Does not seem to listen when spoken to directly				
--	--	--	--	--

4. Does not follow through on instructions and fails to finish schoolwork (not due to oppositional behavior or failure to understand)				
---	--	--	--	--

5. Has difficulty organizing tasks and activities				
---	--	--	--	--

6. Avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort				
--	--	--	--	--

7. Loses things necessary for tasks or activities (school assignments, pencils, books)				
--	--	--	--	--

8. Is easily distracted by extraneous stimuli				
---	--	--	--	--

9. Is forgetful in daily activities				
-------------------------------------	--	--	--	--

For Office Use Only _____ /9

10. Fidgets with hands or feet or squirms in seat				
---	--	--	--	--

11. Leaves seat in classroom or in other situations in which remaining seated is expected				
---	--	--	--	--

12. Runs about or climbs excessively in situations in which remaining seated is expected				
--	--	--	--	--

13. Has difficulty playing or engaging in leisure activities quietly				
--	--	--	--	--

14. Is "on the go" or often acts as if "driven by a motor"				
--	--	--	--	--

15. Talks excessively				
-----------------------	--	--	--	--

16. Blurts out answers before questions have been completed				
---	--	--	--	--

17. Has difficulty waiting in line				
------------------------------------	--	--	--	--

18. Interrupts or intrudes in on others (eg, butts into conversations/games)				
--	--	--	--	--

For Office Use Only _____ /9



Symptoms (continued) Never Occasionally Often Very Often

- 19. Loses temper _____
- 20. Activity defies or refuses to comply with adults' requests or rules _____
- 21. Is angry or resentful _____
- 22. Is spiteful and vindictive _____
- 23. Bullies, threatens, or intimidates others _____
- 24. Initiates physical fights _____
- 25. Lies to obtain goods for favors or to avoid obligations (eg, "cons" others) _____
- 26. Is physically cruel to people _____
- 27. Has stolen items of nontrivial value _____
- 28. Deliberately destroys others' property _____

For Office Use Only
_____/10

- 29. Is fearful, anxious, or worried _____
- 30. Is self-conscious or easily embarrassed _____
- 31. Is afraid to try new things for fear of making mistakes _____
- 32. Feels worthless or inferior _____
- 33. Blames self for problems; feels guilty _____
- 34. Feels lonely, unwanted, or unloved; complains that "no one loves him or her" _____
- 35. Is sad, unhappy, or depressed _____

For Office Use Only
_____/7

Academic Performance Excellent Above Average Average Somewhat of a Problem Problematic

- 36. Reading _____
- 37. Mathematics _____
- 38. Written expression _____

For Office Use Only
4s: ____/3

For Office Use Only
5s: ____/3

Classroom Behavioral Performance Excellent Above Average Average Somewhat of a Problem Problematic

- 39. Relationship with peers _____
- 40. Following directions _____
- 41. Disrupting class _____
- 42. Assignment completion _____
- 43. Organizational skills _____

For Office Use Only
4s: ____/5

For Office Use Only
5s: ____/5

Comments:

Please return this form to: _____

Mailing address: _____

Fax number: _____



For Office Use Only

Total number of questions scored 2 or 3 in questions 1–9: _____

Total number of questions scored 2 or 3 in questions 10–18: _____

Total number of questions scored 2 or 3 in questions 19–28: _____

Total number of questions scored 2 or 3 in questions 29–35: _____

Total number of questions scored 4 in questions 36–38: _____

Total number of questions scored 5 in questions 36–38: _____

Total number of questions scored 4 in questions 39–43: _____

Total number of questions scored 5 in questions 39–43: _____

Adapted from the Vanderbilt Rating Scales developed by Mark L. Wolraich, MD.

The recommendations in this publication do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Original document included as part of *Caring for Children With ADHD: A Resource Toolkit for Clinicians*, 2nd Edition. Copyright © 2012 American Academy of Pediatrics. All Rights Reserved. The American Academy of Pediatrics does not review or endorse any modifications made to this document and in no event shall the AAP be liable for any such changes.

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™



NICHQ
National Initiative for
Children's Healthcare Quality