



Pediatric Clinic
 PATIENT EDUCATION HANDOUTS

NOTE TO SCHOOL – STUDENT EVALUATION FOR ADHD

Regarding: _____

FMP/LAST 4: _____ DOB: _____ Sex: _____

Date of evaluation: _____

_____ is under evaluation for possible ADHD. As part of this evaluation, we would like to request your cooperation in completion of the attached **NICHQ Vanderbilt Teacher Assessment Scale**. Two of these forms are attached. In general, we would like the teacher or teachers who spend the most time with the student or who teach the most academically demanding subjects to complete these forms. If there are any questions the responder is unable to answer, please indicate “don’t know” or “N/A” so that we will know that the question was not simply overlooked.

If this evaluation has been done, we would appreciate copies of the testing to review as a part of our evaluation. If the testing has not yet been performed, we would like to request the evaluation to complete the documentation of his diagnosis and treatment.

Please contact me at 526-7653 if you have any questions.

Pediatric Clinic
 Evans Army Community Hospital
 Fort Carson, Colorado 80913

Teacher’s Name: _____ Class Time: _____ Class Name/Period: _____

Today’s Date: _____ Child’s Name: _____ 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: _____.

Is this evaluation based on a time when the child was on medication was not on medication not sure?

SYMPTOMS	Never	Occasionally	Often	Very Often
1. Fails to give attention to details or makes careless mistakes in schoolwork.	0	1	2	3
2. Has difficulty sustaining attention to tasks or activities.	0	1	2	3
3. Does not seem to listen when spoken to directly.	0	1	2	3
4. Does not follow through on instructions and fails to finish school-work (not due to oppositional behavior or failure to understand).	0	1	2	3
5. Has difficulty organizing tasks and activities.	0	1	2	3
6. Avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort.	0	1	2	3
7. Loses things necessary for tasks or activities (school assignments, pencils, or books).	0	1	2	3
8. Is easily distracted by extraneous stimuli.	0	1	2	3
9. Is forgetful in daily activities.	0	1	2	3
Total number of questions scored “2” or “3” in question #'s 1-9: _____				
10. Fidgets with hands or feet or squirms in seat.	0	1	2	3
11. Leaves seat in classroom or in other situations in which remaining seated is expected.	0	1	2	3
12. Runs about or climbs excessively in situations in which remaining seated is expected.	0	1	2	3
13. Has difficulty playing or engaging in leisure activities quietly.	0	1	2	3
14. Is “on the go” or often acts as if “driven by a motor.”	0	1	2	3
15. Talks excessively.	0	1	2	3
16. Blurts out answers before questions have been completed.	0	1	2	3
17. Has difficulty waiting in line.	0	1	2	3
18. Interrupts or intrudes on others (e.g., butts into conversations/ games).	0	1	2	3
Total number of questions scored “2” or “3” in question #'s 10-18: _____				
Total Symptom Score for question #'s 1-18: _____				
19. Loses temper.	0	1	2	3
20. Actively defies or refuses to comply with adult’s requests or rules.	0	1	2	3
21. Is angry or resentful.	0	1	2	3
22. Is spiteful and vindictive.	0	1	2	3
23. Bullies, threatens, or intimidates others.	0	1	2	3
24. Initiates physical fights.	0	1	2	3
25. Lies to obtain goods for favors or to avoid obligations (e.g., “cons” others)	0	1	2	3
26. Is physically cruel to people.	0	1	2	3
27. Has stolen items of nontrivial value.	0	1	2	3
28. Deliberately destroys others’ property.	0	1	2	3

Total number of questions scored “2” or “3” in question #'s 19-28: _____

-Please Turn Over-

Teacher’s Name: _____ Class Time: _____ Class Name/Period: _____

Today’s Date: _____ Child’s Name: _____ Grade Level: _____

	Never	Occasionally	Often	Very Often
29. Is fearful, anxious, or worried.	0	1	2	3
30. Is self-conscious or easily embarrassed.	0	1	2	3
31. Is afraid to try new things for fear of making mistakes.	0	1	2	3
32. Feels worthless or inferior.	0	1	2	3
33. Blames self for problems; feels guilty.	0	1	2	3
34. Feels lonely, unwanted, or unloved; complains that “no one loves him/her.”	0	1	2	3
35. Is sad, unhappy, or depressed.	0	1	2	3

Total number of questions scored “2” or “3” in question #'s 29-35: _____

PERFORMANCE <i>Academic Performance</i>	Excellent	Above Average	Average	Somewhat of A Problem	Problematic
36. Reading	1	2	3	4	5
37. Mathematics	1	2	3	4	5
38. Written Expression	1	2	3	4	5
<i>Classroom Behavioral Performance</i>	Excellent	Above Average	Average	Somewhat of A Problem	Problematic
39. Relationship with peers	1	2	3	4	5
40. Following directions	1	2	3	4	5
41. Disrupting class	1	2	3	4	5
42. Assignment completion	1	2	3	4	5
43. Organizational skills	1	2	3	4	5

Total number of questions scored “4” or “5” in question #'s 36-43: _____

Average Performance Score: _____

COMMENTS:

PLEASE RETURN THIS FORM TO: Pediatric Clinic - Evans Army Community Hospital

MAILING ADDRESS: 7500 Cochrane Circle

Fort Carson, Colorado 80913

FAX NUMBER: 719-526-7673

Teacher’s Name: _____ Class Time: _____ Class Name/Period: _____

Today’s Date: _____ Child’s Name: _____ 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: _____.

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41. Disrupting class	1	2	3	4	5
42. Assignment completion	1	2	3	4	5
43. Organizational skills	1	2	3	4	5

Total number of questions scored “4” or “5” in question #'s 36-43: _____

Average Performance Score: _____

COMMENTS:

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FAX NUMBER: 719-526-7673



Pediatric Clinic

PATIENT EDUCATION HANDOUTS

Recommendations to Help Students with Attention Deficit Disorders

Children with attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD) often have significant problems in school. Inattention, impulsiveness, hyperactivity, disorganization, and other difficulties can lead to unfinished assignments, careless errors, and disruptive behavior. By using relatively simple and straightforward accommodations to the classroom environment or teaching style, teachers can maximize the strengths and minimize the weaknesses of students with ADD/ADHD. Small changes in how a teacher approaches the student with ADD/ADHD or in what the teacher expects can turn a frustrating year into a winning one for the child.

Some recommendations for helping a child with ADD/ADHD in the classroom are listed below.

INATTENTION

- seat student in quiet area
- seat student near good role model or “study buddy”
- increase distance between desks
- allow extra time to complete assigned work
- shorten assignments or work periods to coincide with span of attention; use timer
- break long assignments into smaller parts so student can see end to work
- assist student in setting short term goals
- give assignments one at a time to avoid work overload
- require fewer correct responses for grade
- reduce amount of homework
- instruct student in self-monitoring using cueing
- pair written instructions with oral instructions
- provide peer assistance in note taking
- give clear, concise instructions
- seek to involve student in lesson presentation
- cue student to stay on task, i.e. private signal
- ignore minor, inappropriate behavior
- increase immediacy of rewards and consequences

IMPULSIVENESS

- use time-out procedure for misbehavior
- supervise closely during transition times
- use "prudent" reprimands for misbehavior (i.e. avoid lecturing or criticism)
- attend to positive behavior with compliments etc..
- acknowledge positive behavior of nearby students
- seat student near role model or near teacher
- set up behavior contract
- instruct student in self monitoring of behavior, i.e. hand raising, calling out
- call on only when hand is raised in appropriate manner
- praise when hand raised to answer question

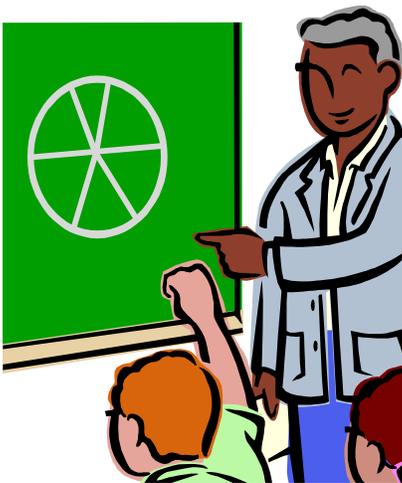
Adapted from: ADAPT: Accommodations Help Students with Attention Deficit Disorders

Harvey C. Parker, Ph.D. Clinical Psychologist

May 02

Mood

- provide reassurance and encouragement
- frequently compliment positive behavior and work product
- speak softly in non-threatening manner if student shows nervousness
- review instructions when giving new assignments to make sure student comprehends directions
- look for opportunities for student to display leadership role in class
- conference frequently with parents to learn about student's interests and achievements outside of school
- send positive notes home
- make time to talk alone with student
- encourage social interactions with classmates if student is withdrawn or excessively shy
- reinforce frequently when signs of frustration are noticed
- look for signs of stress build up and provide encouragement or reduced work load to alleviate pressure and avoid temper outburst
- spend more time talking to students who seem pent up or display anger easily .
- provide brief training in anger control: encourage student to walk away; use calming strategies; tell nearby adult if getting angry



Motor Activity

- allow student to stand at times while working
- provide opportunity for "seat breaks" i.e. run errands, etc.
- provide short break between assignments
- supervise closely during transition times
- remind student to check over work product if performance is rushed and careless
- give extra time to complete tasks (especially for students with slow motor tempo)

Academic Skills

- if **reading is weak**: provide additional reading time; use "previewing" strategies; select text with less on a page; shorten amount of required reading; avoid oral reading
- if **oral expression is weak**: accept all oral responses; substitute display for oral report; encourage student to tell about new ideas or experiences; pick topics easy for student to talk about
- if **written language is weak**: accept non-written forms for reports (i.e. displays, oral, projects); accept use of typewriter, word processor, tape recorder; do not assign large quantity of written work; test with multiple choice or fill-in questions
- if **math is weak**: allow use of calculator; use graph paper to space numbers; provide additional math time; provide immediate correctness feedback and instruction via modeling of the correct computational procedure

Organization Planning

- ask for parental help in encouraging organization,
- provide organization rules
- encourage student to have notebook with dividers and folders for work
- provide student with homework assignment book
- supervise writing down of homework assignments
- send daily/weekly progress reports home
- regularly check desk and notebook for neatness, encourage neatness rather than penalize sloppiness
- allow student to have extra set of books at home
- give assignments one at a time
- assist student in setting short term goals
- do not penalize for poor handwriting if visual-motor defects are present
- encourage learning of keyboarding skills
- allow student to tape record assignments or homework



Compliance

- praise compliant behavior
- provide immediate feedback
- ignore minor misbehavior
- use teacher attention to reinforce positive behavior
- use "prudent" reprimands for misbehavior (i.e. avoid lecturing or criticism)
- acknowledge positive behavior of nearby student
- supervise student closely during transition times
- seat student near teacher
- set up behavior contract
- implement classroom behavior management system
- instruct student in self-monitoring of behavior

Socialization

- praise appropriate behavior
- monitor social interactions
- set up social behavior goals with student and implement a reward program.
- prompt appropriate social behavior either verbally or with private signal
- encourage cooperative learning tasks with other students
- provide small group social skills training
- praise student frequently
- assign special responsibilities to student in presence of peer group so others observe student in a positive light.