

DELAWARE VALLEY PEDIATRIC ASSOCIATES, P.A.



132 FRANKLIN CORNER RD.
LAWRENCEVILLE, NJ 08648
P: 609-896-4141 F: 609-896-3940
www.delvalpeds.com

DIPLOMATES,
AMERICAN BOARD OF PEDIATRICS
HARRIS C. LILIENTHAL, MD, FAAP
GLENN S. PALSKEY, MD, FAAP
EUGENE SHAPIRO, MD, FAAP
JULIE HALVORSEN, DO, FAAP
DEBORAH YAO, MD, FAAP

PEDIATRIC NURSE PRACTITIONERS
LINDA STEVENS, RN, NPC, CPNP
SHOHINI HOLDEN, MSN, CPNP
BETH LEAHY, MSN, CPNP
LACTATION SPECIALIST
DEBRA MANNELLA, RN, CBC

PEDIATRIC SYMPTOM CHECKLIST (PSC-17)

Name _____ Today's Date _____

	Never (0)	Sometimes (1)	Often (2)
<i>Please mark under the heading that best describes your child:</i>			
Feels sad, unhappy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feels hopeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is down on self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worries a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seems to be having less fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fidgety, unable to sit still	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Daydreams too much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distracted easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acts as if driven by a motor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fights with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does not listen to rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does not understand other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teases others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blames others for his/her trouble	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuses to share	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes things that do not belong to him/her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[updated 1/28/14]