ADHD RATING SCALE IV - SELF REPORT VERSION (University of Massachusetts Medical Center)

Your Name:	Age:	Date:		
Circle the number that best descri	v	r over the pa	st 6 mor	
	Never or Rarely	Sometimes	<u>Often</u>	Very Often
1. Fail to give close attention to details or ma careless mistakes in my work.	ke 0	1	2	3
2. Fidget with hands or feet or squirm in my seat.	0	1	2	3
3. Difficulty sustaining my attention in tasks fun activities.	or 0	1	2	3
4. Leave my seat in classroom or in other situations in which seating is expected.	0	1	2	3
5. Don't listen when spoken to directly.	0	1	2	3
6. Feel restless.	0	1	2	3
7. Don't follow through on instructions and fail to finish work.	0	1	2	3
8. Have difficulty engaging in leisure activities or doing fun things quietly.	es 0	1	2	3
9. Have difficulty organizing tasks and activities.	0	1	2	3
10. Feel "on the go" or "driven by a motor."	, 0	1	2	3
11. Avoid, dislike, or reluctant to engage in wo that requires sustained mental effort.	ork 0	1	2	3
12. Talk excessively.	0	1	2	3
13. Lose things necessary for tasks or activities	es. 0	1	2	3
14. Blurt out answers before questions have been completed.	0	1	2	3
15. Easily distracted.	0	1	2	3
16. Have difficulty awaiting turn.	0	1	2	3
17. Forgetful in daily activities.	0	1	2	3
18. Interrupt or intrude on others.	0	1	2	3