NICHQ Vanderbilt Assessment Scale – TEACHER Informant*

Tead	cher's Name: Class Time:	Class Time:		_ Class Name/Period:		
Toda	ay's Date: Child's Name:			Grade Level:		
Dire	ctions: Each rating should be considered in the context of what is appropriate f reflect that child's behavior since the beginning of the school year. Plea have been able to evaluate the behaviors:					
Is th	is evaluation based on a time when the child \square was on medication \square was no	ot on med	lication 🗌 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 schoolwork (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	
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	
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	
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	
	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 or her"	0	1	2	3	
	Is sad, unhappy, or depressed	0	1	2	3	

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

Today's Date: Child's Name:			Grade Level:			
Performance						
Academic Performance		Excellent	Average	Above Average	Somewhat of a Problem	Problematic

1

1

2

2

3

3

4

5

	Classroom Behavioral Performance	Excellent	Average	Above 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

Comments:

36. Reading

37. Mathematics

38. Written expression

Please return this form to: Pediatrics Department

Mailing Address: Multicare Associates – Fridley Medical Center

7675 Madison Street NE Fridley, Minnesota 55432

Fax Number: 763.785.8552

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 Symptom Score for questions 1-18: _____

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 or 5 in questions 36-43: _____

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