# TRUENORTH PSYCHIATRIC NURSING CORP

863 Bowsprit Road, Ste 174 | Chula Vista, CA 91914

Phone: 619-614-8009 | Email: maja.ceranic.nusn@gmail.com


**ADULT ADHD SCREENING**

## Adult ADHD Screening Questionnaire

TrueNorth clinical screening aid. This questionnaire is not diagnostic and should be interpreted with a comprehensive clinical evaluation.

Patient Name: _____ Date: _____

### ATTENTION & EXECUTIVE FUNCTION

During the PAST 6 MONTHS, how often have the following caused difficulty in your daily life?

| Symptom | Never | Rarely | Sometimes | Often | Very Often |
|---|---|---|---|---|---|
| 1. Difficulty sustaining attention during tasks, conversations, reading, or meetings. | ○ | ○ | ○ | ○ | ○ |
| 2. Making avoidable mistakes or overlooking details because attention drifts. | ○ | ○ | ○ | ○ | ○ |
| 3. Difficulty organizing tasks, priorities, appointments, or belongings. | ○ | ○ | ○ | ○ | ○ |
| 4. Putting off tasks that require prolonged mental effort or concentration. | ○ | ○ | ○ | ○ | ○ |
| 5. Frequently losing or misplacing items needed for daily activities. | ○ | ○ | ○ | ○ | ○ |
| 6. Being easily pulled away from a task by noises, thoughts, messages, or activity around you. | ○ | ○ | ○ | ○ | ○ |
| 7. Frequently forgetting appointments, obligations, errands, or routine responsibilities. | ○ | ○ | ○ | ○ | ○ |
| 8. Starting tasks but struggling to complete them before moving to something else. | ○ | ○ | ○ | ○ | ○ |

### HYPERACTIVITY & IMPULSIVITY

| | | | | | |
|---|---|---|---|---|---|
| 9. Feeling internally restless, driven, or uncomfortable sitting still for long periods. | ○ | ○ | ○ | ○ | ○ |
| 10. Fidgeting, tapping, shifting position, or needing to move when expected to remain seated. | ○ | ○ | ○ | ○ | ○ |
| 11. Talking excessively or having difficulty stopping once you begin speaking. | ○ | ○ | ○ | ○ | ○ |
| 12. Interrupting, finishing others' sentences, or answering before a question is completed. | ○ | ○ | ○ | ○ | ○ |
| 13. Difficulty waiting your turn in conversations, lines, traffic, or other situations. | ○ | ○ | ○ | ○ | ○ |
| 14. Acting or making decisions quickly without fully considering consequences. | ○ | ○ | ○ | ○ | ○ |

### HISTORY & FUNCTIONAL IMPACT

Were similar attention, organization, hyperactivity, or impulsivity problems present before age 12? ○ Yes ○ No ○ ?

Do these difficulties occur in more than one setting (home, work, school, or relationships)? ○ Yes ○ No ○ ?

Areas affected: ☐ Work/School ☐ Home ☐ Relationships ☐ Finances

### CLINICAL CONTEXT

Sleep problems: ○ Yes ○ No

Current anxiety/depression: ○ Yes ○ No

Substance-use concern: ☐

Previously diagnosed with ADHD? ○ Yes ○ No

Prior ADHD medication? ○ Yes ○ No

### PATIENT & PROVIDER REVIEW

What ADHD-related difficulty would you most like help with?

Provider Notes:

Further ADHD evaluation indicated: ○ Yes ○ No

QbTest/QbCheck considered: ○ Yes ○ No

**CLINICAL NOTE**

ADHD diagnosis requires assessment of developmental history, impairment, symptom context, and alternative explanations.
Objective testing such as QbTest/QbCheck may supplement, but does not replace, the clinical evaluation.