

# *South East Bay Pediatric Medical Group, Inc.*

FELLOWS OF AMERICAN ACADEMY OF PEDIATRICS  
INFANTS CHILDREN TEENAGERS



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## **Connors and Vanderbilt Questionnaires**

Dear Teachers and School Counselors,

We are currently evaluating \_\_\_\_\_ DOB: \_\_\_\_\_ in our office for behavioral issues. We appreciate any feedback you can provide us during this evaluation process. Our goal is to obtain more information that will enable us to form a specific plan in order to help this child become a more successful student. Enclosed are questionnaires that should be completed individually by current teachers and counselors, and teachers and counselors in the preceding year who were involved directly in this child's education.

*Please send the information directly to our office address listed above, or in a sealed envelope to the child's parents who can then send the information to us. We appreciate all the information that you can provide for us. We recognize the crucial role you play in this child's education and development. If you have any additional questions or concerns, or if you feel that you have concerns best discussed directly, please do not hesitate to contact our office.*

Thank you.

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# Connors Teacher Questionnaire

Name of Child: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Teacher Name: \_\_\_\_\_ Subject: \_\_\_\_\_

Please answer all questions. Beside each item below, indicate the degree of the problem by a check mark.

	Not at all.	Just a little.	Pretty much.	Very much.
1. Restless in the "squirmy" sense.				
2. Makes inappropriate noises when he/she shouldn't.				
3. Demands must be met immediately.				
4. Acts "smart" (impudent or sassy).				
5. Tempter outbursts and unpredictable behavior.				
6. Overly sensitive to criticism.				
7. Distractibility or attention span problem.				
8. Disturbs other children.				
9. Daydreams.				
10. Pouts and sulks.				
11. Mood changes quickly and drastically.				
12. Quarrelsome.				
13. Submissive attitude towards authority.				
14. Restless, always "up and on the go."				
15. Excitable, impulsive.				
16. Excessive demands for teacher's attention.				
17. Appears to be unaccepted by group.				
18. Appears to be easily led by other children.				
19. No sense of fair play.				
20. Appears to lack leadership.				
21. Fails to finish things that he starts.				
22. Childish and immature.				
23. Denies mistakes or blames others.				
24. Does not get along well with other children.				
25. Uncooperative with classmates.				
26. Easily frustrated with efforts.				
27. Uncooperative with teacher.				
28. Difficulty in learning.				

Total: \_\_\_\_\_

Predicted for age and sex: \_\_\_\_\_

## Vanderbilt Teacher Assessment Scale

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. Please indicate the number of weeks or months that 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.

Please answer all questions.

	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
Total:	<input style="width: 60px; height: 30px;" type="text"/>			
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 or games).	0	1	2	3
Total:	<input style="width: 60px; height: 30px;" type="text"/>			

19. Loses temper.	0	1	2	3
20. Actively defies or refuses to comply with adults' 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:				
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:				

<b>Performance</b>	<b>Excellent</b>	<b>Above Average</b>	<b>Average</b>	<b>Somewhat of a Problem</b>	<b>Problematic</b>
Reading	1	2	3	4	5
Mathematics	1	2	3	4	5
Written Expression	1	2	3	4	5
Relationship with peers	1	2	3	4	5
Following directions	1	2	3	4	5
Disrupting class	1	2	3	4	5
Assignment completion	1	2	3	4	5
Organizational skills	1	2	3	4	5

<b>Severity of Impairment</b>	
Considering your total experience with this child, how severely impaired is he/she at this time? Compare this child to average normal children you are familiar with from your totality of experience. Please circle the number that best describes this child.	
Normal, No Impairment 1	Symptoms are <i>not present</i> any more than expected (of a typical child of the same age and gender in the same situations) and <i>do not produce impairment</i> of normal functioning at home or at school.
Slight Impairment 2	Symptoms are present <i>a little more</i> frequently or intensely than expected (of a typical child of the same age and gender in the same situations) and only <i>rarely</i> produce impairment of normal functioning at home or school.
Mild Impairment 3	Symptoms are present <i>somewhat</i> more frequently or intensely than expected (of a typical child of the same age and gender in the same situations) and only <i>sometimes</i> produce impairment of normal functioning at home or school.
Moderate Impairment 4	Symptoms are present <i>a lot more</i> frequently or intensely than expected (of a typical child of the same age and gender in the same situations) and <i>usually</i> produce impairment of normal functioning at home or school.
Severe Impairment 5	Symptoms are present <i>a great deal</i> more frequently or intensely than expected (of a typical child of the same age and gender in the same situations) and <i>most of the time</i> produce impairment of normal functioning at home or school.
Very Severe Impairment 6	Symptoms are present <i>so much</i> more frequently or intensely than expected (of a typical child of the same age and gender in the same situations) that they <i>almost always</i> produce impairment of normal functioning at home or school.
Maximal, Profound Impairment 7	Symptoms are present so frequently or intensely that they produce <i>significant and pervasive impairment</i> , which creates a crisis requiring immediate action to prevent serious deterioration, to avoid danger, or to prevent harm.

Name of person completing form: \_\_\_\_\_

Signature: \_\_\_\_\_