

# ADULT ATTENTION DEFICIT DISORDERS EVALUATION SCALE (A-ADDES)

Developed According to the DSM-IV™ Criteria

Stephen B. McCarney, Ed.D.

Paul D. Anderson, S.Psy.S.

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The *Adult Attention Deficit Disorders Evaluation Scale (A-ADDES)* enables private and clinical psychologists, psychiatrists, and other mental health professionals to evaluate and diagnose Attention-Deficit/Hyperactivity Disorder in adults from input provided by a self-report, a significant other in the home environment, and a supervisor in the workplace.

The **A-ADDES** was developed from research in Attention-Deficit/Hyperactivity Disorder; current literature in psychology and neurology; and current practices in identification and diagnosis. The subscales, **Inattentive** and **Hyperactive/Impulsive**, are based on the most currently recognized subtypes of ADHD. The results provided by the scale are commensurate with criteria used by psychiatric personnel to identify Attention-Deficit/Hyperactivity Disorder in adults. The scale is available in three versions: **Self-Report** (58 items), a reporting form for the client/patient; **Home** (46 items), a reporting form for a significant other in the home; and **Work** (54 items), a reporting form for supervisor or co-worker input.

The **A-ADDES** was standardized on a total of 6,074 ratings for the three versions of the scale and provides separate norms for male and female adults 18 through 65+ years of age. Demographic characteristics of the standardization sample represent national percentages of gender, residence, race, geographic area, and occupation.

Internal consistency for each version of the **A-ADDES** ranged from .97 to .98. Content validity was established through the initial development process. Item performance correlated positively with total scale performance, further substantiating the internal cohesiveness of the scale as a measure of Attention-Deficit/Hyperactivity Disorder.

The **A-ADDES** uses frequency-referenced quantifiers. Each item on the **A-ADDES** is rated on a five-point scale from (0) DOES NOT ENGAGE IN THE BEHAVIOR to (4) ONE TO SEVERAL TIMES PER HOUR. Following administration, four types of scores may be obtained: frequency rating for each item (reflecting the frequency and severity of behaviors), subscale raw score (the sum of the frequency ratings for each subscale), subscale standard score (to establish a consistent basis for comparing students), and a percentile score (a global index of behavior in all areas measured within the total scale). From the subscale standard and percentile scores, a profile of the adult's level of functioning across the subscales may be constructed.

The **A-ADDES Self-Report, Home, and Work Versions** of the scale can each be completed in approximately 20 minutes. The **A-ADDES complete kit** consists of **Self-Report, Home, and Work Version Rating Forms** and **Technical Manuals; A-ADDES/DSM-IV Forms**; and the *Adult Attention Deficit Disorders Intervention Manual*.

The *Adult Attention Deficit Disorders Intervention Manual* was designed to be used by the mental health professional and the client/patient to develop a program of behavioral interventions based on goals and objectives identified from the **A-ADDES**. The *Adult Attention Deficit Disorders Intervention Manual* used in conjunction with the **A-ADDES** provides a comprehensive assessment, diagnostic, and prescriptive program for adults with Attention-Deficit/Hyperactivity Disorder.



**H A W T H O R N E**

Phone: (800) 542-1673 FAX: (800) 442-9509

# SELF-REPORT VERSION RATING FORM

Stephen B. McCarney

## COVER SHEET

### RATING GUIDELINES

- If the rater has not ever engaged in a specific behavior, or has not engaged in recent memory, the behavior should be rated

0

DO NOT ENGAGE IN BEHAVIOR.

- If the rater engages in the behavior as often as once a month to several times per month (e.g., one to three times), the rating should be

1

ONE TO SEVERAL TIMES PER MONTH.

- If the behavior occurs one or more times per week, even several times per week (e.g., one to four times), the rating should be

2

ONE TO SEVERAL TIMES PER WEEK.

- If the behavior occurs at least once a day or more than one time a day (e.g., one to four times), the rating should be

3

ONE TO SEVERAL TIMES PER DAY.

- If the behavior occurs at least once an hour and includes behaviors with unlimited frequency which may even defy accurate counting at extremely high rates, the rating should be

4

ONE TO SEVERAL TIMES PER HOUR.

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TO RATER: Rate yourself using the quantifiers (0-4) provided.  
Every item must be rated. Do not leave any boxes blank.

**DO NOT  
ENGAGE  
IN THE  
BEHAVIOR**

0

**ONE TO  
SEVERAL  
TIMES PER  
MONTH**

1

**ONE TO  
SEVERAL  
TIMES PER  
WEEK**

2

**ONE TO  
SEVERAL  
TIMES PER  
DAY**

3

**ONE TO  
SEVERAL  
TIMES PER  
HOUR**

4

**SUBSCALE 1**

- |  |  |
|--|--|
| <p><input type="checkbox"/> 3 1. I am easily distracted from tasks by external stimuli at home (e.g., TV, radio, etc.).</p> <p><input type="checkbox"/> 3 2. I have difficulty with activities which require sustained listening (e.g., listening to and following verbal directions) (NOT DUE TO HEARING LOSS).</p> <p><input type="checkbox"/> 2 3. I fail to direct or maintain attention to important sounds in the immediate environment (e.g., warning signals, timers, etc.) (NOT DUE TO HEARING LOSS).</p> <p><input type="checkbox"/> 2 4. I need verbal directions and questions frequently repeated (e.g., miss part of directions/questions, need reminders, etc.) (NOT DUE TO HEARING LOSS).</p> <p><input type="checkbox"/> 3 5. I have difficulty concentrating (e.g., following a conversation, concentrating when reading, etc.).</p> <p><input type="checkbox"/> 2 6. I am disorganized with my possessions (e.g., lose or fail to find important papers, wallet, keys, clothes, etc.).</p> <p><input type="checkbox"/> 3 7. I fail to remain on-task to complete or finish chores at home (e.g., more interested in other activities, sit and do nothing, stare at the TV, etc.).</p> <p><input type="checkbox"/> 2 8. I forget (e.g., events or appointments, to return things, to do things, etc.).</p> <p><input type="checkbox"/> 3 9. I change from one activity to another without finishing the first, without putting things away, before it is time to move on to the next activity, etc.</p> <p><input type="checkbox"/> 3 10. I have a short attention span unless the topic or task is interesting to me (e.g., difficulty paying attention during a movie/TV program, difficulty directing attention to the task at hand, easily distracted, etc.).</p> <p><input type="checkbox"/> 2 11. I fail to complete and return work assignments which I bring home. (If you do not bring work home, rate this item 0.)</p> <p><input type="checkbox"/> 2 12. I fail to independently perform or complete chores or fulfill responsibilities (e.g., have to be reminded, fail to begin or complete responsibilities without assistance, etc.).</p> | <p><input type="checkbox"/> 2 13. I fail to remain on-task to prepare for work assignments (e.g., fail to study for a presentation, fail to finish tasks taken home, etc.). (If it is not necessary to prepare for work assignments at home, rate this item 0.)</p> <p><input type="checkbox"/> 2 14. I have difficulty organizing responsibilities (e.g., difficulty using time efficiently, difficulty performing chores, lose things, difficulty returning home on time, fail to return things, etc.).</p> <p><input type="checkbox"/> 3 15. I complete tasks with little or no regard for quality or neatness of work.</p> <p><input type="checkbox"/> 2 16. I have difficulty reading (NOT DUE TO VISION LOSS) or following written directions (e.g., difficulty following written steps provided until task is completed, etc.).</p> <p><input type="checkbox"/> 3 17. I am easily frustrated by tasks which are not interesting to me (e.g., give up easily, fail to put forth my best effort, etc.).</p> <p><input type="checkbox"/> 2 18. I fail to follow necessary steps in tasks (e.g., performing chores, operating tools or appliances, etc.).</p> <p><input type="checkbox"/> 2 19. I have difficulty managing time at home (e.g., fail to complete tasks on time, fail to accurately estimate the amount of time to finish a chore or activity, etc.).</p> <p><input type="checkbox"/> 3 20. I have difficulty getting a task started and I tend to put off things and procrastinate.</p> <p><input type="checkbox"/> 2 21. I require eye contact in order to listen successfully (e.g., one-to-one situation) (NOT DUE TO HEARING LOSS).</p> <p><input type="checkbox"/> 1 22. I have difficulty demonstrating short-term memory skills (e.g., fail to remember two- or three-step directions, fail to remember materials needed for a task. etc.).</p> <p><input type="checkbox"/> 2 23. I have difficulty remembering sequences (e.g., events in a daily routine, steps in an activity, etc.).</p> <p><input type="checkbox"/> 2 24. I lose track of what I am doing (e.g., forget why I went to get something, etc.).</p> <p><input type="checkbox"/> 2 25. I have difficulty managing time at work (e.g., fail to complete tasks on time, fail to accurately estimate the amount of time to finish a task or assignment, etc.).</p> |
|--|--|

- 2 26. I have difficulty managing paperwork on the job. (If you do not work on paperwork, rate this item a 0.)
- 2 27. I have difficulty listening to and/or paying attention in conversations with fellow employees and/or supervisors (NOT DUE TO HEARING LOSS).
- 3 28. I attend more successfully when close to the source of sound (e.g., the person speaking during a meeting or conference situation) (NOT DUE TO HEARING LOSS).
- 2 29. I fail to perform and/or complete work assignments during work time (e.g., fail to use the workday efficiently to finish tasks, fail to meet stated deadlines for project/assignment completion, go to another assignment before completing the first, etc.).
- 2 30. I am disorganized at work (e.g., not having necessary materials, missing materials, failing to find completed assignments, failing to follow the steps of the assignment, etc.).
- 2 31. I fail to perform up to my ability level at work (i.e., perform below my expected level of performance, etc.).
- 4 41. I feel restless (e.g., shift positions in my seat, pace about, etc.).
- 3 42. I have difficulty remaining seated when it is expected (e.g., religious service, entertainment activities, during a meeting, etc.).
- 3 43. I handle objects excessively (e.g., twirl pencils or pens, play with things, click ballpoint pens, sharpen pencils, etc.).
- 2 44. I have difficulty adjusting my behavior to the expectations of different situations (e.g., get excited during an activity, difficulty settling down for a quiet activity, etc.).
- 3 45. I move about unnecessarily (e.g., difficulty sitting still, leave seat, walk around, etc.).
- 3 46. I make excessive noise (e.g., interrupt, hum, talk excessively, etc.).
- 2 47. I talk beyond what is expected or at inappropriate times.
- 3 48. I engage in inappropriate behaviors while seated (e.g., tip my chair, put my feet on the table, tap and make noises, etc.).
- 4 49. I engage in nervous habits (e.g., bite my fingernails, twirl my hair, drum my fingers on tables, chew pencils or pens, chew the inside of my cheek, etc.).

71 Raw Score

### SUBSCALE 2

- 2 32. I have difficulty waiting my turn at home or at work.
- 3 33. I interrupt others (e.g., begin talking while others are talking, etc.).
- 3 34. I am impulsive (e.g., act before thinking, react immediately to situations without thinking, impatient, etc.).
- 2 35. I have difficulty following a routine (e.g., do things out of order, fail to wait for an activity at the scheduled time, etc.).
- 2 36. I start things before receiving and/or reading directions/instructions (e.g., fail to follow directions/instructions for finishing an assignment at work, fail to finish tasks at home, etc.).
- 2 37. I disturb others (e.g., during private times, when people are talking, when people are involved in activities, etc.).
- 1 38. I fail to consider the consequences of my behavior (e.g., act before evaluating the possible consequences of my actions, etc.).
- 1 39. I have accidents or make mistakes which are the result of impulsive or careless behavior (e.g., traffic tickets, frequent car accidents, etc.).
- 4 40. I move about while seated (e.g., fidget, squirm, etc.).
- 2 50. I engage in unpredictable behavior (e.g., fail to react in a socially acceptable manner to daily occurrences, act before thinking, etc.).
- 1 51. I engage in physically daring activities (e.g., take unnecessary risks, fail to consider the possible hazards of my behavior, engage in reckless driving, etc.).
- 2 52. I talk to my spouse/significant other when that person is busy doing something independently (i.e., interrupt).
- 2 53. I need to have my demands met immediately (e.g., difficulty waiting for anything, etc.).
- 1 54. I blurt out responses or answers before it is appropriate at work.
- 2 55. I have difficulty working effectively in a group situation (e.g., fail to stay on-task and remain productive when at a table with fellow employees and/or at a desk with co-workers nearby, etc.).
- 2 56. I intrude on others at work (e.g., when people are talking, trying to work, or involved in activities, etc.).
- 2 57. I am late, or unprepared for work (e.g., fail to finish expected tasks, late to work, etc.).
- 2 58. I get overexcited (e.g., lose control in group activities, become loud, etc.).

63 Raw Score

# SELF-REPORT VERSION RATING FORM

Stephen B. McCarney

## PROFILE SHEET

Name: Austin P. Williams Gender: M

Address: 723 Trestle Lane

City: Midvale State: PA

Date of rating: 1996 7 15  
(year) (month) (day)

Date of birth: 1971 5 5  
(year) (month) (day)

Age at rating: 25 2 10  
(years) (months) (days)

SUMMARY OF SCORES			
Subscales	Raw Score	Standard Score <small>(Appendix A)</small>	Raw Score SEM <small>(Table 6)</small>
1. Inattentive	71	3	3.99
2. Hyperactive-Impulsive	63	3	3.92

TOTAL SCORE			
Sum of Subscale SS	Percentile <small>(Appendix B)</small>	Sum of Subscale RS	Raw Score SEM <small>(Table 6)</small>
6	2nd	134	5.84

Standard Scores	Subscales		Percentiles	Percentile Rank
	1 Inattentive	2 Hyperactive-Impulsive		
20	●	●	≥99	●
19	●	●	95	●
18	●	●	90	●
17	●	●	85	●
16	●	●	80	●
15	●	●	75	●
14	●	●	70	●
13	●	●	65	●
12	●	●	60	●
11	●	●	55	●
10	●	●	50	●
9	●	●	45	●
8	●	●	40	●
7	●	●	35	●
6	●	●	30	●
5	●	●	25	●
4	●	●	20	●
3	●	●	15	●
2	●	●	10	●
1	●	●	5	●
0	●	●	≤1	●

Important: Before using this scale, read the section titled Rating Guidelines on page one.

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# HOME VERSION RATING FORM

Stephen B. McCarney

## COVER SHEET

### RATING GUIDELINES

- The subject should be rated by persons with primary observational opportunities. These persons would usually be a spouse, significant other, roommate, or person who interacts with the subject in the home environment.
- Any number of persons may rate the subject. Each person rating the subject should use a separate rating form.
- The observer should rely on observations of the subject's behavior as it occurs naturally in the home environment.
- It is recommended that the rater read each quantifier with the item before rating the item. Using item 5 as an example, the rater would first read, "Does not have difficulty concentrating," then "One to several times per month has difficulty concentrating," then "One to several times per week has difficulty concentrating," then "One to several times per day has difficulty concentrating," and finally, "One to several times per hour has difficulty concentrating."
- It is not necessary to complete the rating of the subject in one day. Several days may elapse before the rater is able to complete the scale.
- If the rater has not personally observed the subject engaging in a specific behavior(s), the rating should be **0**  
**DOES NOT ENGAGE IN THE BEHAVIOR.**
- If the rater has observed the subject demonstrate the behavior one to several times per month (e.g., one to three times), the rating should be **1**  
**ONE TO SEVERAL TIMES PER MONTH.**
- If the behavior has been demonstrated one or more times per week, even several times per week (e.g., one to four times), the rating should be **2**  
**ONE TO SEVERAL TIMES PER WEEK.**
- If the behavior has been demonstrated one or more times per week, even several times per week (e.g., one to four times), the rating should be **3**  
**ONE TO SEVERAL TIMES PER WEEK.**
- If the behavior has been demonstrated at least once an hour and included behavior with unlimited frequency which may even defy accurate counting at extremely high rates, the rating should be **4**  
**ONE TO SEVERAL TIMES PER HOUR.**

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TO RATER: Rate the individual using the quantifiers (0-4) provided.  
Every item must be rated. Do not leave any boxes blank.

**DO NOT  
ENGAGE  
IN THE  
BEHAVIOR**

0

**ONE TO  
SEVERAL  
TIMES PER  
MONTH**

1

**ONE TO  
SEVERAL  
TIMES PER  
WEEK**

2

**ONE TO  
SEVERAL  
TIMES PER  
DAY**

3

**ONE TO  
SEVERAL  
TIMES PER  
HOUR**

4

**SUBSCALE 1**

- |   |   |
|---|---|
| <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 1. Is easily distracted from tasks by external stimuli at home (e.g., TV, radio, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 2. Has difficulty with activities which require sustained listening (e.g., listening to and following verbal directions) (NOT DUE TO HEARING LOSS) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 3. Has difficulty directing attention or maintaining attention to important sounds in the immediate environment (e.g., warning signals, timers, etc.) (NOT DUE TO HEARING LOSS) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 4. Needs verbal directions and questions frequently repeated (e.g., misses part of directions/questions, needs reminders, etc.) (NOT DUE TO HEARING LOSS) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 5. Has difficulty concentrating (e.g., following a conversation, concentrating when reading, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 6. Is disorganized with possessions (e.g., loses or fails to find important papers, wallet, keys, clothes, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 7. Has difficulty remaining on-task to complete or finish chores at home (e.g., is more interested in other activities, sits and does nothing, stares at the TV, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 8. Forgets (e.g., forgets events or appointments, forgets to return things, forgets to do things) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 9. Changes from one activity to another without finishing the first, without putting things away, before it is time to move on to the next activity, etc. <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 10. Has a short attention span unless the topic or task is interesting to him/her (e.g. has difficulty paying attention during a movie, TV program, has difficulty directing attention to the task at hand, is easily distracted) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">1</p> 11. Fails to complete work which is brought home (If work is not brought home, rate this item 0) | <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 12. Fails to independently perform or complete chores or fulfill responsibilities (e.g., has to be reminded, fails to begin or complete responsibilities without assistance, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">1</p> 13. Fails to remain on-task to prepare for work assignments (e.g., fails to study for a presentation, fails to finish tasks taken home) (If it is not necessary to prepare for work assignments at home, rate this item 0) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 14. Has difficulty organizing responsibilities (e.g., has difficulty using time efficiently, has difficulty performing chores, loses things, has difficulty returning home on time, fails to return things, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 15. Completes tasks with little or no regard for quality or neatness of work <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 16. Has difficulty reading (NOT DUE TO VISION LOSS) or following written directions (e.g., has difficulty following steps until task is completed, written steps are provided but are not followed) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 17. Is easily frustrated by tasks which are not interesting to her/him (e.g., gives up easily, fails to put forth his/her best effort, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 18. Fails to follow necessary steps in tasks (e.g., performing chores, operating tools or appliances, etc.) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 19. Has difficulty managing time at home (e.g., fails to complete tasks on time, fails to accurately estimate the amount of time to finish a chore or activity) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 20. Has difficulty getting a task started, and tends to put off things and procrastinate <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">3</p> 21. Requires eye contact in order to listen successfully (e.g., one-to-one situation) (NOT DUE TO A HEARING LOSS) <p style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">2</p> 22. Has difficulty demonstrating short-term memory skills (e.g., fails to remember two- or three-step directions, fails to remember materials needed for a task, etc.) |
|---|---|

DO NOT  
ENGAGE  
IN THE  
BEHAVIOR

0

ONE TO  
SEVERAL  
TIMES PER  
MONTH

1

ONE TO  
SEVERAL  
TIMES PER  
WEEK

2

ONE TO  
SEVERAL  
TIMES PER  
DAY

3

ONE TO  
SEVERAL  
TIMES PER  
HOUR

4

- 1 23. Has difficulty remembering sequences (e.g., events in a daily routine, steps in an activity)
- 2 24. Loses track of what he/she is doing (e.g., forgets why he/she went to get something)

55 Raw Score

SUBSCALE 2

- 2 25. Has difficulty waiting his/her turn
- 3 26. Interrupts others (e.g., begins talking while others are talking, etc.)
- 3 27. Is impulsive (e.g., acts before thinking, reacts immediately to situations without thinking, is impatient, etc.)
- 2 28. Has difficulty following a routine (e.g., does things out of order, fails to wait for an activity at the scheduled time, etc.)
- 2 29. Starts things before receiving and/or reading directions/instructions (e.g., putting things together, performing chores, using tools, etc.)
- 3 30. Disturbs others (e.g., during private times, when people are talking, when people are involved in activities, etc.)
- 2 31. Fails to consider consequences of his/her behavior (i.e., acts before evaluating consequences of his/her actions)
- 1 32. Has accidents or makes mistakes which are the result of impulsive or careless behavior (e.g., frequent car accidents, traffic tickets, etc.)
- 3 33. Moves about while seated (e.g., fidgets, squirms, etc.)
- 4 34. Appears restless (e.g., shifts position in seat, paces about, etc.)
- 3 35. Has difficulty remaining seated when it is expected (e.g., religious service, entertainment activities, during a meeting, etc.)

- 3 36. Handles objects excessively (e.g., twirls pencils or pens, plays with things, clicks ball-point pens, repeatedly sharpens pencils, etc.)

- 2 37. Has difficulty adjusting his/her behavior to the expectations of different situations (e.g., gets excited during one activity, but has difficulty settling down for a quiet activity, etc.)

- 3 38. Moves about unnecessarily (e.g., cannot sit still, leaves seat, walks around, etc.)

- 3 39. Makes excessive noise (e.g., interrupts, hums, talks excessively, etc.)

- 2 40. Talks beyond what is expected or at inappropriate times

- 3 41. Engages in inappropriate behaviors while seated (e.g., tips chair, puts feet on table, taps and makes noises, etc.)

- 3 42. Engages in nervous habits (e.g., bites fingernails, twirls hair, drums fingers on tables, chews pencils or pens, chews inside of cheek, etc.)

- 2 43. Engages in unpredictable behavior (e.g., fails to react in a socially acceptable manner to daily occurrences, acts before thinking, etc.)

- 1 44. Engages in physically daring activities (e.g., takes unnecessary risks, fails to consider the possible hazards of his/her behavior, engages in reckless driving, etc.)

- 2 45. Talks to spouse/significant other when that person is busy doing something independently (i.e., interrupts)

- 2 46. Needs to have demands at home met immediately (i.e., has difficulty waiting for anything)

54 Raw Score



# HOME VERSION RATING FORM

Stephen B. McCarney

## PROFILE SHEET

Name: Austin P. Williams Gender: M

Address: 723 Trestle Lane

City: Midvale State: PA

Date of rating: 1996 7 15  
(year) (month) (day)

Date of birth: 1971 5 5  
(year) (month) (day)

Age at rating: 25 2 10  
(years) (months) (days)

SUMMARY OF SCORES			
Subscales	Raw Score	Standard Score <small>(Appendix A)</small>	Raw Score SEM <small>(Table 6)</small>
1. Inattentive	55	4	3.62
2. Hyperactive-Impulsive	54	4	3.63

TOTAL SCORE			
Sum of Subscale SS	Percentile <small>(Appendix B)</small>	Sum of Subscale RS	Raw Score SEM <small>(Table 6)</small>
8	3rd	109	5.32

Standard Scores	Subscales		Percentiles	Percentile Rank
	1 Inattentive	2 Hyperactive-Impulsive		
20	●	●	≥99	●
19	●	●	95	●
18	●	●	90	●
17	●	●	85	●
16	●	●	80	●
15	●	●	75	●
14	●	●	70	●
13	●	●	65	●
12	●	●	60	●
11	●	●	55	●
10	●	●	50	●
9	●	●	45	●
8	●	●	40	●
7	●	●	35	●
6	●	●	30	●
5	●	●	25	●
4	●	●	20	●
3	●	●	15	●
2	●	●	10	●
1	●	●	5	●
0	●	●	≤1	●

Important: Before using this scale, read the section titled Rating Guidelines on page one.

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(800) 542-1673

# WORK VERSION RATING FORM

Stephen B. McCarney

## COVER SHEET

### RATING GUIDELINES

- The subject should be rated by persons who have primary observational opportunities (e.g., employer, supervisor, and/or fellow employee). These should be persons who work directly with the subject during employment situations.
- Any number of persons may rate the subject. Each person should independently rate (i.e., without conferring with others) the subject using a separate rating form.
- It is recommended that the rater read each quantifier with the item before rating the item. Using item 11 as an example, the rater would first read, "Does not lose track of what he/she is doing," then "One to several times per month loses track of what he/she is doing," then "One to several times per week loses track of what he/she is doing," then "One to several times per day loses track of what he/she is doing," and finally, "One to several times per hour loses track of what he/she is doing."
- It is not necessary to complete the rating of the subject in one day. Several days may elapse before the rater is able to complete the scale.
- If the rater has not personally observed the subject engaging in a specific behavior(s), the rating should be **0**  
**DOES NOT ENGAGE IN THE BEHAVIOR.**
- If the rater has observed the subject demonstrate the behavior one to several times per month (e.g., one to three times), the rating should be **1**  
**ONE TO SEVERAL TIMES PER MONTH.**
- If the rater has observed the behavior demonstrated one or more times per week, even several times per week (e.g., one to four times), the rating should be **2**  
**ONE TO SEVERAL TIMES PER WEEK.**
- If the behavior has been demonstrated at least once a day or more than one time a day (e.g., one to four times), the rating should be **3**  
**ONE TO SEVERAL TIMES PER DAY.**
- If the behavior has been demonstrated at least once an hour and included behaviors with unlimited frequency which may even defy accurate counting at extremely high rates, the rating should be **4**  
**ONE TO SEVERAL TIMES PER HOUR.**

IMPORTANT \*\*\* PLEASE NOTE: \*\*\* IMPORTANT

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**TO RATER: Rate every item using the quantifiers (0-4) provided.  
Every item must be rated. Do not leave any boxes blank.**

**DOES NOT  
ENGAGE  
IN THE  
BEHAVIOR**

0

**ONE TO  
SEVERAL  
TIMES PER  
MONTH**

1

**ONE TO  
SEVERAL  
TIMES PER  
WEEK**

2

**ONE TO  
SEVERAL  
TIMES PER  
DAY**

3

**ONE TO  
SEVERAL  
TIMES PER  
HOUR**

4

**SUBSCALE 1**

- |  |   |
|--|---|
| <p>3 1. Completes assignments with little or no regard for quality or neatness of work</p> <p>3 2. Has difficulty listening to and/or paying attention in conversations with fellow employees and/or supervisors (NOT DUE TO HEARING LOSS)</p> <p>3 3. Needs verbal directions and questions frequently repeated (e.g., misses part of directions/questions)</p> <p>2 4. Fails to direct attention or fails to maintain attention to important sounds in the immediate environment (e.g., warning signals, intercom announcements, etc.)</p> <p>3 5. Has difficulty with activities which require sustained listening (e.g., listening to and following verbal directions) (NOT DUE TO HEARING LOSS)</p> <p>4 6. Attends more successfully when close to the source of sound (e.g., the person speaking during a conference or meeting situations) (NOT DUE TO HEARING LOSS)</p> <p>3 7. Requires eye contact in order to listen successfully (e.g., one-to-one situation) (NOT DUE TO HEARING LOSS)</p> <p>2 8. Has difficulty demonstrating short-term memory skills (e.g., fails to remember two- or three-step directions, fails to remember materials needed for a task, etc.)</p> <p>2 9. Has difficulty remembering sequences (e.g., events in a daily routine; steps in an activity, task, assignment, etc.)</p> <p>3 10. Has difficulty concentrating (e.g., staying on an assigned task, following a conversation, concentrating when reading, etc.)</p> <p>3 11. Loses track of what he/she is doing (e.g., forgets why he/she went to get something)</p> <p>1 12. Fails to complete and return work assignments taken home (If the individual does not take work home, rate this item 0)</p> | <p>2 13. Fails to perform and/or complete work assignments during work time (e.g., fails to use the workday efficiently to finish tasks, fails to meet stated deadlines for project/assignment completion, will go on to another assignment before completing the first, etc.)</p> <p>2 14. Is disorganized at work (e.g., to the point of not having necessary materials, missing materials, failing to find completed assignments, failing to follow the steps of the assignment, etc.)</p> <p>2 15. Fails to independently perform and complete assignments (e.g., fails to finish tasks by himself/herself, fails to finish work-related tasks)</p> <p>3 16. Fails to remain on-task during work (e.g., is more interested in other activities, sits and does nothing, etc.)</p> <p>2 17. Fails to perform up to his/her ability level (e.g., performs below expected level of performance)</p> <p>2 18. Has difficulty following steps required to complete a task (e.g., does steps in wrong order, omits a step, etc.)</p> <p>2 19. Has difficulty reading (NOT DUE TO VISION LOSS) or following written directions (e.g., has difficulty following written steps until task is completed, written steps are provided but are not followed)</p> <p>3 20. Changes from one activity to another without finishing the first, without putting things away, before it is time to move on, etc.</p> <p>2 21. Has difficulty managing time at work (e.g., fails to accurately estimate the amount of time to finish an assignment or task, fails to complete work on time)</p> <p>2 22. Has difficulty getting a task started and tends to put off things and procrastinate</p> <p>2 23. Has difficulty managing paperwork on the job (If the individual does not work on paperwork, rate this item a 0)</p> <p>3 24. Is disorganized with possessions (e.g., loses or fails to find important papers, car keys, wallet, etc.)</p> |
|--|---|

DOES NOT ENGAGE IN THE BEHAVIOR	ONE TO SEVERAL TIMES PER MONTH	ONE TO SEVERAL TIMES PER WEEK	ONE TO SEVERAL TIMES PER DAY	ONE TO SEVERAL TIMES PER HOUR				
0	1	2	3	4				
2				3	25. Forgets (e.g., forgets important events or appointments, forgets to do things, forgets to return things)	3	40. Has difficulty following a routine (e.g., does things out of order, fails to wait for an activity at the scheduled time, etc.)	
2				2	26. Has a short attention span unless the topic or task is interesting to her/him (e.g., fails to direct attention to the task at hand, is easily distracted)	2	41. Has difficulty working effectively in a group situation (e.g., fails to stay on-task and remain productive when at a table with fellow employees and/or at a desk with co-workers nearby, etc.)	
2				3	27. Has difficulty organizing responsibilities (e.g., fails to perform assignments, loses things, fails to come to work on time, does not return things)	3	42. Handles objects excessively (e.g., twirls pencils or pens, clicks ball-point pens, repeatedly sharpens pencils, etc.)	
3				2	28. Is easily frustrated by tasks which are not interesting to her/him (e.g., gives up easily, fails to put forth his/her best effort, etc.)	2	43. Talks beyond what is expected or at inappropriate times	
<u>68</u> Raw Score					2	44. Has difficulty adjusting his/her behavior to the expectations of different situations (e.g., gets excited at lunch/break time and does not settle down, etc.)	3	45. Engages in inappropriate behaviors while seated (e.g., tips chair or desk, puts feet on desk, taps and makes noises, etc.)
<b>SUBSCALE 2</b>					3	29. Begins an assignment before receiving or reading complete directions or instructions or fails to follow directions or instructions	3	46. Becomes overexcited (e.g., loses control in group activities, becomes loud, etc.)
3				2	30. Has difficulty waiting his/her turn (e.g., has difficulty following established protocol for making appointments, waiting to see someone, etc.)	3	47. Moves about unnecessarily (e.g., has difficulty sitting still, leaves seat during a meeting, walks around the work space excessively, etc.)	
2				4	31. Blurts out responses or answers before it is appropriate	4	48. Engages in nervous habits (e.g., bites fingernails, paces, twirls hair, drums fingers on top of table, chews pencils or pens, chews inside of cheek, etc.)	
3				2	32. Interrupts fellow employees (e.g., begins talking while another employee is talking, interrupts another employee when he/she is busy with another task)	2	49. Engages in unpredictable behavior (e.g., fails to react in a socially acceptable manner to daily occurrences, acts before thinking)	
3				2	33. Talks to others when he/she should be working independently	2	50. Engages in physically daring activities (e.g., takes unnecessary risks, fails to consider the possible hazards to his/her behavior)	
3				2	34. Moves about while seated, fidgets, squirms, etc.	2	51. Is late, or unprepared for work (e.g., fails to finish expected tasks, is tardy to work)	
3				2	35. Appears restless (e.g., shifts position in seat, paces about, etc.)	2	52. Needs to have demands at work met immediately (e.g., has difficulty waiting to talk to someone who is busy)	
2				3	36. Disturbs other employees who are trying to work, listen, etc. (e.g., attempts to carry on irrelevant conversations)	3	53. Intrudes on others (e.g., when people are talking, trying to work, or involved in activities, etc.)	
2				1	37. Makes unnecessary comments or noises in the work place (e.g., interrupts, hums, talks excessively, etc.)	1	54. Has accidents or makes mistakes which are the result of careless or impulsive behavior	
3					38. Is impulsive (e.g., reacts immediately to situations without thinking, is impatient, fails to wait for a turn or for assistance from a supervisor/fellow employee, etc.)	<u>64</u> Raw Score		
2					39. Fails to consider consequences of his/her behavior (e.g., acts before evaluating consequences of his/her actions)			

# WORK VERSION RATING FORM

Stephen B. McCarney

## PROFILE SHEET

Name: Austin P. Williams Gender: M

Address: 204 Trestle Lane

City: Midvale State: PA

Date of rating: 1996 7 12  
(year) (month) (day)

Date of birth: 1966 3 7  
(year) (month) (day)

Age at rating: 30 4 5  
(years) (months) (days)

Rated by: J. Smith

Relationship to the subject: Supervisor

SUMMARY OF SCORES			
Subscales	Raw Score	Standard Score (Appendix A)	Raw Score SEM (Table 7)
Inattentive	68	2	3.44
Hyperactive-Impulsive	64	2	3.03

TOTAL SCORE			
Sum of Subscale SS	Percentile (Appendix B)	Sum of Subscale RS	Raw Score SEM (Table 7)
4	6th	132	4.75

Standard Scores	Subscales		Percentiles	Percentile Rank
	1 Inattentive	2 Hyperactive-Impulsive		
20	●	●	≥99	●
19	●	●	95	●
18	●	●	90	●
17	●	●	85	●
16	●	●	80	●
15	●	●	75	●
14	●	●	70	●
13	●	●	65	●
12	●	●	60	●
11	●	●	55	●
10	●	●	50	●
9	●	●	45	●
8	●	●	40	●
7	●	●	35	●
6	●	●	30	●
5	●	●	25	●
4	●	●	20	●
3	●	●	15	●
2	●	●	10	●
1	●	●	5	●
0	●	●	≤1	●

**Important: Before using this scale, read the section titled Rating Guidelines on page one.**

A-ADDES WV  
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## III. Interventions

### 1 Difficulty waiting turn at home and at work

**1.** Learn to verbalize your feelings before losing control (e.g., “I’m getting tired of waiting.” “I’m getting bored standing here.” etc.).

**2.** Distinguish between your wants and needs. Consult with a supervisor, co-worker, relative, friend, etc. about alternative ways to have your needs met.

**3.** Make it a habit to write down alternative activities and then choose one of those activities when feeling impulsive.

**4.** Reduce impatience in order to increase work productivity and general happiness.

**5.** Analyze daily, weekly, and monthly tasks at home and at work. Determine which tasks stimulate impatience. Organize activities so a pleasurable activity follows one that stimulates impatience.

**6.** Allow yourself the option of performing the activity at another time (e.g., earlier/later in the day, another day, etc.).

**7.** Develop an awareness of the consequences of your behavior by writing down or talking through problems which may occur due to your impatience (e.g., Your spouse may be angry. You may feel guilty.).

**8.** Reduce the emphasis on competition. Competitive activities may cause you to become anxious and impatient.

**9.** Realize that all behavior has negative or positive consequences. Practice behaviors that will lead to positive consequences.

**10.** Remind yourself not to interrupt others before a conversation, meeting, etc. begins.

**11.** Have a supervisor, co-worker, relative, friend, etc. cue you when you attempt to begin activities before receiving directions (e.g., The person can touch your arm as a signal that you need to receive directions.).

**12.** Enlist different people (e.g., supervisor, co-worker, relative, friend, etc.) to reinforce you when you demonstrate patience.

**13.** Save items for discussion for the weekly staff/family meetings.

**14.** Monitor and maintain awareness of your impatient behavior. For immediate control: stop, count to 10 using slow deep breaths, and tell yourself to relax. If needed, remove yourself from the situation.

**15.** Reward yourself for demonstrating patience. During your break/free time, do something calm and restful or perform an activity of interest.

**16.** Do not use ADHD as an excuse. Take full responsibility for your actions. However, understand and accept problems that ADHD brings into your life while learning to make accommodations.

**17.** Practice self-control activities designed to allow you to gain composure before continuing an activity (e.g., placing hands on desk, sitting with feet on the floor, making eye contact with the person who is talking, etc.).

**18.** Avoid situations with others who are impatient or have difficulty waiting their turn (e.g., ordering in restaurants, holiday shopping, weekends at amusement parks).

**19.** Change your schedule to avoid situations which stimulate impatience (e.g., Leave for work earlier to avoid traffic; go to lunch earlier/later to avoid the rush, etc.).

**20.** Go to a designated area when you become impatient with a situation (e.g., restroom, office, hallway, etc.).

**21.** Identify the situations in which you are most impatient. After you have identified these situations, think of ways to minimize their occurrences.