

Attention Deficit Disorder (ADD)/Attention Deficit w/ Hyperactivity Self Test

The test physicians use to diagnose ADD/ADHD is subjective and rests on observing symptoms such as hyperactivity and attention problems. The American Psychiatric Association lists 14 behavioral checkpoints for an ADHD and ADD test, of which at least eight symptoms must be present for a child to be officially classified as ADD, with or without hyperactivity.

The attached self ADD/ADHD test expands on those behavioral checkpoints of hyperactivity and attention problems to include finer details of an ADHD and/or ADD test.

The ADD/ADHD test is based solely on behavior observations since ADD does not have clear physical signs that can be seen in an x-ray or a lab test.

The biggest problem with an ADD/ADHD test is that diagnosis is purely subjective and often depends on the tolerance of the observer. What one person might view as hyperactivity, another might view as well within the acceptable range.

It may be helpful to have more than one person (besides the parents and child) such as a teacher(s) fill out the test, so results can be compared.

Take this self test with an open mind based on reality. Check the box only if the statement on the self test occurs frequently.

Most children will display every character statement in this test at least once in their childhood. It is only when hyperactivity and attentional characteristics occur on a frequent basis that they are identified as ADD or ADHD.

More than 20 checked items on the self test indicates a strong tendency toward ADD or ADHD.

Perhaps the most important question to ask in a test is if the child's hyperactivity, lack of enthusiasm toward school, poor grades, disruptive behavior or other symptoms poses an obstacle to the child reaching his or her potential. ADD/ADHD can be a gift, if managed well. People with ADD/ADHD are typically sensitive, intuitive and highly creative. The task is to find ways to manage the negative symptoms that will allow the positive attributes to shine through.

PLEASE NOTE: This test should only be used as an inventory to see if a student should be considered for an ADD/ADHD evaluation. This self test is not meant to diagnose ADD or ADHD. Only an experienced physician can make an official diagnosis

ADD/ADHD SELF TEST

Does not work to potential in school, receives “receives not working to potential “ teacher comments.

Has short attention span unless very interested in a particular subject

Has a family history of ADD/ADHD, learning problems or substance abuse.

Is easily distracted

Lacks attention to detail

Has sloppy handwriting

Has difficulty putting thoughts to paper

Has trouble listening carefully to details

Frequently forgets or misplaces things

Skips around while reading

Had difficulty learning new games and new skills

Has poor listening skills

Transposes numbers, letters, or words

Is restless or in constant motion, is always “on the go”

Concentrates better when moving or fidgeting

Has trouble sitting still or sitting in one place too long

Has increased anxiety or nervousness

- Has history of bedwetting beyond the age of 5.
- Has poor communication skills
- Lacks tact, often spurting out the first thing that comes to mind
- Acts impulsively or dangerously without considering the consequences.
- Is easily bored
- Says things without thinking and later regrets having said them
- Starts to answer questions before the questions are fully asked
- Is impatient
- Has trouble following verbal directions
- Makes careless mistakes in schoolwork
- Has tendency to embarrass others
- Lies or steals on impulse
- Has trouble maintaining an organized work or living area
- Is often late
- Procrastinates, especially with multi-faceted tasks
- Is easily overwhelmed by everyday tasks
- Has trouble getting started
- Starts projects but does not finish them
- Fails to finish schoolwork or chores
- Is inconsistent with school performance
- Spends excessive time on homework
- Has tendency to drift away

- Has problems with self esteem
- Has a negative attitude
- Has trouble maintaining friendships
- Acts immature for age
- Has trouble expressing thoughts and feelings
- Is verbally or physically abusive
- Avoids group activities or organized sports
- Has a quick temper, is “short-fused”
- Has rage outbursts
- Gets upset by minor annoyances
- Is argumentative
- Worries needlessly or excessively
- Has tendency towards obsessive behavior
- Turns words around in conversations
- Performs poorly under pressure
- Has difficulty reading unless very interested in the subject
- Has difficulty falling asleep
- Has difficulty waking up or feeling fully awake
- Is frequently tired
- Startles easily
- Is sensitive to touch, clothes, noise or light
- Is more comfortable moving than sitting still

- ___Has moods swings from highs to lows
- ___Has trouble planning a series of tasks or activities or activities
- ___Become upset easily, is “thin-skinned”
- ___Talks excessively
- ___Fidgets, even when sitting quietly
- ___Has difficulty waiting in turn during group activities
- ___Frequent daydreams or “spaces out”
- ___”Blanks out” when taking tests or under pressure
- ___Has low frustration tolerance
- ___Has frequent behavior problems in school

