

## Adult ADHD Self-Report Scale (ASRS-v1.1) Symptom Checklist

Patient Name	Today's Date				
Instructions <i>Please answer the questions below, rating yourself on a scale of 1 through 5 on each of the criteria as shown to the right. As you answer each question in a way that best describes how you have felt and conducted yourself in the past 6 months. Please give this completed checklist to your healthcare professional to discuss during your appointment.</i>	1	2	3	4	5
	Never	Rarely	Sometime	Often	Always
1. How often do you have trouble wrapping up the final details of a project, once the challenging parts have been done?					
2. How often do you have difficulty getting things in order when you have to do a task that requires organization?					
3. How often do you have problems remembering appointments or obligations?					
4. When you have a task that requires a lot of thought, how often do you avoid or delay getting started?					
5. How often do you fidget or squirm with your hands or feet when you have to sit down for a long time?					
6. How often do you feel overly active and compelled to do things, like you were driven by a motor?					
7. How often do you make careless mistakes when you have to work on a boring or difficult project?					
8. How often do you have difficulty keeping your attention when you are doing boring or repetitive work?					
9. How often do you have difficulty concentrating on what people say to you, even when they are speaking to you directly?					
10. How often do you misplace or have difficulty finding things at home or at work?					
11. How often are you distracted by activity or noise around you?					
12. How often do you leave your seat in meetings or other situations in which you are expected to remain seated?					
13. How often do you feel restless or fidgety?					
14. How often do you have difficulty unwinding and relaxing when you have time to yourself?					
15. How often do you find yourself talking to much when you are in social situations?					
16. When you are in a conversation, how often do you find yourself finishing the sentences of the people you are talking to, before they can finish them themselves?					
17. How often do you have difficulty waiting your turn in situations when turn taking is required?					
18. How often do you interrupt others when they are busy?					
<b>Total Score: Inattention, Subscale A</b>					
<b>Total Score: Hyperactivity, Subscale B</b>					

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## Overview

The Adult ADHD Self-Report Scale (ASRS-v1.1) may be used as a tool to help screen for attention-deficit/hyperactivity disorder (ADHD) in adult patients. The checklist takes about 5 minutes to complete. The eighteen questions in the ASRS-v1.1 are consistent with DSM-IV-TR criteria and address the manifestations of ADHD symptoms in adults.

## Instructions

Ask the patient to complete the symptom checklist, marking a number between 1 and 5 of the frequency he/she experiences symptoms compatible to the question. Ask the patient to answer each question in a way that best describes how he/she has felt and conducted him/herself in the past 6 months.

Review the checklist with your patient, evaluating the level of impairment associated with each symptom. Consider the patient's work/school, social, and family settings. Symptom frequency is often associated with symptom severity; therefore, the symptom checklist may also aid in the assessment of impairments. If your patient has frequent symptoms, you may want to ask him/her to describe how these problems have affected the ability to work, take care of things at home, or get along with other people, such as a significant other.

Be sure to assess the presence of these symptoms in childhood. Adults who have ADHD need not have been formally diagnosed in childhood. In evaluating a patient's history, look for evidence of early-appearing and long-standing problems with attention or self-control. Some significant symptoms should have been present in childhood, but full symptomology is not necessary.

## Scoring

The ASRS-v1.1 has two subscales: Inattention (subscale A) and Hyperactivity (subscale B). Questions related to subscale A (1-4 and 7-12) are tinted with a yellow background, while questions related to subscale B (5-6 and 13-18) are tinted in a blue background. Tally each subscale and include the final total in the bolded boxes.

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The Adult ADHD Self-Report Scale (ASRS-v1.1) Symptom Checklist was developed in conjunction with the World Health Organization (WHO), and the Workgroup on Adult ADHD. The ASRS v1.1 can be used for free and does not require any formal permission or approval.

## Reference

Kessler, R. C. , Adler, L., Ames, M., Demler, O., Faraone, S., Hiripi, E., Howes, M. J. , Jin, R., Scnik, K., Spencer, T., Ustun, T. B., & Walters, E. E. (2005). The World Health Organization adult ADHD self-report scale (ASRS). *Psychological Medicine*, 35(2), 245-256.