

Deisy Cristina Boscán, Ph.D., A Professional Corporation

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Child's Name: _____ DOB: _____ DATE: _____

Fidgets	Difficulty awaiting turn
Difficulty remaining seated	Often engages in physically dangerous activities
Easily distracted	Often loses temper
Explosive temper outburst without apparent reason	Often actively defies or refuses adult requests or rules
Difficulty playing quietly	Blames others for his own mistakes
Often interrupts	Is often angry or resentful
Often loses things	Often swears or uses obscene language
Often blurts out answers to questions before they have been completed	Often deliberately does things to annoy other people
Difficulty following instructions	Lies often
Difficulty sustaining attention	Truant from school
Often talks excessively	Cruel to animals
Shifts from one activity to another	Use a weapon in a fight
Often does not listen	Cruel to people
Poor concentration	Appears agitated
Marked self-consciousness	Often argues with adults
Marked inability to relax	Steals things
Depressed or irritable mood most of the day nearly every day	Upset when away from home or separated from parent or caretaker
Poor appetite or overeating	If often spiteful or wants to get revenge
Appears slowed down	Has run away from home
Feelings of worthlessness or excessive guilt	Sets fires on purpose
Low self esteem	Destroys property
Loss of pleasure in play, leisure activities	Forces someone else into sexual activity
Trouble sleeping or sleeps too much, nearly everyday	Worries about being separated from parent or caretakers
Feels tired, has little energy	Has been bullied
Has talked about suicide or made suicide attempt	If often touchy and easily annoyed by others
Odd fascinations	Fights, Bullies or threatens
Seems to be in own world much of the time	Usually refuses to sleep alone
Shows limited emotion	Repeated nightmares
No/few friends	Unrealistic worry about future events
Odd postures or body movements	Usually tries to avoid being alone
Overreacts to touch and other sensory stimuli	Often feels sick or complains of vague pains
Twitches, constantly sniffs, or has (vocal/motor) tics	Worries that something bad will happen to family member
Behaviors which are repeated many times a day	Unrealistic concern about competence
Overreacts to noise or fails to react to noise	Unrealistic worries about harm coming to others
Rituals which are repeated frequently	Excessive need for reassurance
Repeats self or others often	Unrealistic concern about appropriateness of past behavior
Little or no interest in other children	Unrealistic fears of contamination
Self-mutilation/self-harm	Doesn't speak in school
Reading problem	Persistent school refusal
Handwriting problem	Conversation which does not make sense
Low grades	Reports hearing voices
Learning problem	Hears things which others can't hear
Speech problem	Has experienced something traumatic
Math problem	Has witnessed repeated conflict between parents

Please describe any additional problems:

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