

Not ADHD Checklist (C) Dr. Henry J. Svec

Child Name:_____ DOB:_____ Age:_____ Parent:_____

Date:_____ Main Concern:_____

Child Strengths:_____

Check each of the following factors that are present- **When You are Sure they have been reviewed** and considered prior to or while beginning an assessment for ADHD. Each of these may result in ADHD like symptoms. These items may be present if your child HAS ADHD as well. Children with ADHD may cause stress in the family and changes in parenting that were the RESULT of ADHD not the cause of the symptoms in the child. These items are best reviewed when considering children aged three to five.

- 1)Move to new home or school__
- 2)Divorce or change in family_
- 3)Death of someone close_
- 4)Financial Problems_
- 5)Birth of new sibling_
- 6)Chaotic Home Environment_
- 7)Possible neglect or abuse in the past_
- 8)Inconsistent Parenting_
- 9)Parents constantly fighting_
- 10)Being Bullied_
- 11)Witness of violence, trauma or abuse_
- 12)Sleep Disturbance_
- 13)Anxiety_
- 14)Oppositional Defiant Disorder_
- 15)Depression_
- 16)Bipolar Disorder_
- 17)Obsessive Compulsive Disorder_
- 18)Autism_
- 19)Tic Disorder_

20) Gifted Profile_

21) Learning Disability_

22) Seizures_

23) Thyroid Disease_

24) Allergies_

25) Iron Deficiency_

26) Ear Infections_

27) Hearing Deficiency_

28) Vision Impairments_

29) Other Medication Side Effects_

30) Post Concussion Syndrome_