

**SYMPTOM CHECK LIST:** check all that apply

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Name of person completing form: \_\_\_\_\_

Main concerns: \_\_\_\_\_

**SAFETY CONCERNS:**

- ☐ Danger to self
- ☐ Hurts self on purpose
- ☐ Danger to others

**BIOLOGICAL:** narrative option on assessment

- ☐ Seems to be hyperactive
- ☐ Seems to have problems paying attention
- ☐ Seems to have organization problems
- ☐ There are physical/medical concerns or history
- ☐ Problems with toileting
- ☐ Immediate family members have mental health concerns
- ☐ Extended family members have mental health concerns
- ☐ Takes medication
- ☐ Needs a medication assessment
- ☐ Problems with pregnancy or delivery
- ☐ Feels sick without a clear reason
- ☐ Problems with sleeping
- ☐ Recent head injury
- ☐ Past head injury
- ☐ Seems very different from others the same age.
- ☐ Unusual fears
- ☐ Unusual rituals or obsessions
- ☐ Bizarre ideas
- ☐ Moods and reactions do **not** match situations
- ☐ Over-reaction to touch or noise
- ☐ Has habits of making noises or body movements that s/he can't seem to control.
- ☐ Makes weird or irrational statements
- ☐ Does **not** seem to know the difference between Real and Fantasy

**DEVELOPMENTAL:** narrative option on assessment

- ☐ The school is worried/concerned
- ☐ Concerns about abilities compared with same age peers
- ☐ Makes inappropriate remarks without seeming to understand the reactions of others
- ☐ Talked, walked, toilet training on time
- ☐ Doesn't seem to understand basic concepts

**DEPRESSIVE SYMPTOMS**

- ☐ Depressed mood
- ☐ Irritable
- ☐ Poor appetite
- ☐ Hopelessness
- ☐ Tired more than usual
- ☐ Low self-esteem
- ☐ Has lost interest in things that used to interest her/him
- ☐ Weight concerns
- ☐ Moves slower than normal
- ☐ Thinks or talks about death
- ☐ Suicidal thoughts/behaviors

**ANXIETY SYMPTOMS**

- ☐ Difficult expressing needs and emotions appropriately
- ☐ Anxious and worries a lot.
- ☐ Elevated stress, anxiety and worry seem to be **new** behaviors
- ☐ Unrealistic worry about the past or future
- ☐ Feels self-consciousness
- ☐ Excessive need for reassurance
- ☐ Panic behavior
- ☐ Excessive distress when thinking about being away from parent or home
- ☐ Avoids being alone
- ☐ Refuses to sleep alone

**OPPOSITIONAL BEHAVIOR**

- ☐ More oppositional than usual
- ☐ Deliberately annoys people
- ☐ Touchy or easily annoyed
- ☐ Often angry and resentful
- ☐ Wants revenge
- ☐ Loses temper
- ☐ Argues with adults
- ☐ Defies or refuses to comply with requested or rules
- ☐ Explosive temper with minimal provocation
- ☐ Aggression towards people
- ☐ Hurts animals on purpose
- ☐ Destroys property when angry or as revenge
- ☐ Lies to get out of consequences.
- ☐ Lies to look good
- ☐ Lies for no good reason
- ☐ Breaks the law
- ☐ Blames others for problems

**RELATIONSHIPS:** narrative option on assessment

- ☐ Difficult time making or keeping friends
- ☐ Enjoys family time
- ☐ Positive relationships with family members
- ☐ Negative relationships with family members
- ☐ Parent can read child's needs
- ☐ Has other adults besides parent(s) that can help with problems

**SITUATIONAL:** narrative option on assessment

- ☐ There are family stressors contributing to concerns
- ☐ There is a clear reason for the worries and stress
- ☐ Child is adopted: \_\_\_\_\_ age
- ☐ Child has been in foster care
- ☐ Child has lived away from parent
- ☐ There are other agencies involved with my family
- ☐ Legal problems/court issues
- ☐ Child has been sexually abused
- ☐ Child has been physically abused
- ☐ Family member substance abuse ( ) current ( ) past
- ☐ Child has witnessed domestic violence
- ☐ Family member is in jail/prison
- ☐ Cultural/ethnic concerns
- ☐ Religious concerns

**DAILY FUNCTIONING AREAS**

- ☐ Stable housing
- ☐ Communication problems
- ☐ Daily problem with routines
- ☐ Needs constant supervision
- ☐ Takes care of possessions
- ☐ Nutrition concerns
- ☐ Family relationships are suffering.
- ☐ Drug and alcohol use or possibility of use
- ☐ Enjoys activities/has fun
- ☐ Involved in community or school activities
- ☐ Lacks social relationships
- ☐ Sexual issues
- ☐ Needs constant reminders about chores or school work
- ☐ Difficulty with coping skills or problem solving
- ☐ There is a worry that behaviors might lead toward juvenile court involvement
- ☐ Hygiene/grooming/dress concerns