



Pediatric Symptom Checklist (PSC-35) Scoring Sheet

Note: This is an **OPTIONAL** tool that a care provider/clinician can use to give meaning to the PSC ratings.

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| Child/Youth's Name: Child/Youth's Date of Birth: Assessment Date (mm/dd/yyyy): | PSC-35 Filled out by: Name of Care Provider/Clinician/Case Manager: |
|--|--|

| Item No. | Attention subscale items | Never (0) | Sometimes (1) | Often (2) |
|----------|------------------------------|-----------|---------------|-----------|
| 4 | Fidgety, unable to sit still | | | |
| 7 | Acts as if driven by a motor | | | |
| 8 | Daydreams too much | | | |
| 9 | Distracted easily | | | |
| 14 | Has trouble concentrating | | | |

Attention subscale score: _____ (Cutoff score: **7** and above = impairment)

| Item No. | Internalizing subscale items | Never (0) | Sometimes (1) | Often (2) |
|----------|------------------------------|-----------|---------------|-----------|
| 11 | Feels sad, unhappy | | | |
| 13 | Feels hopeless | | | |
| 19 | Is down on him or herself | | | |
| 22 | Worries a lot | | | |
| 27 | Seems to be having less fun | | | |

Internalizing subscale score: _____ (Cutoff score: **5** and above = impairment)

| Item No. | Externalizing subscale items | Never (0) | Sometimes (1) | Often (2) |
|----------|---|-----------|---------------|-----------|
| 16 | Fights with others | | | |
| 29 | Does not listen to rules | | | |
| 31 | Does not understand other people's feelings | | | |
| 32 | Teases others | | | |
| 33 | Blames others for his or her troubles | | | |
| 34 | Takes things that do not belong to him/her | | | |
| 35 | Refuses to share | | | |

Externalizing subscale score: _____ (Cutoff score: **7** and above = impairment)

| No. | Other items | 0 | 1 | 2 |
|-----|---------------------------------|---|---|---|
| 1 | Complains of aches/pains | | | |
| 2 | Spends more time alone | | | |
| 3 | Tires easily, has little energy | | | |
| 5 | Has trouble with a teacher | | | |
| 6 | Less interested in school | | | |
| 10 | Is afraid of new situations | | | |
| 12 | Is irritable, angry | | | |
| 15 | Less interest in friends | | | |
| 17 | Absent from school | | | |

| No. | Other items | 0 | 1 | 2 |
|-----|---|---|---|---|
| 18 | School grades dropping | | | |
| 20 | Visits doctor w/ doctor finding nothing wrong | | | |
| 21 | Has trouble sleeping | | | |
| 23 | Wants to be with you more than before | | | |
| 24 | Feels he or she is bad | | | |
| 25 | Takes unnecessary risks | | | |
| 26 | Gets hurt frequently | | | |
| 28 | Acts younger than children his or her age | | | |
| 30 | Does not show feelings | | | |

Total of 18 items not included in 3 subscales: _____

Total Score (Attention subscale score + Internalizing subscale score + Externalizing subscale score + Total of items not included in 3 subscales) = _____

Note: If 4 or more items are left blank, the questionnaire is considered invalid so Total score should not be calculated

28 or above = psychological impairment

27 or below = not impaired