

Permian Psychiatry

PARENT'S QUESTIONNAIRE

Name of Child _____ Date _____

Please answer all questions. Beside each item below indicate the degree of the problem by a check mark ().

	Not at all	Just a little	Pretty much	Very much
1. Picks at things (nails, fingers, hair, clothing, etc.)?				
2. Sassy to grown-ups?				
3. Problems with making or keeping friends?				
4. Excitable, impulsive?				
5. Wants to be in control or run things?				
6. Sucks or chews (thumb; clothing; blankets)?				
7. Cries easily or often?				
8. Carries a chip on his shoulder?				
9. Daydreams?				
10. Difficulty learning?				
11. Restless in the "squirmy" sense?				
12. Fearful of new situations; (new people; places; going to school)?				
13. Restless, always up and on the go?				
14. Destructive?				
15. Tells lies or stories that aren't true?				
16. Shy?				
17. Gets into more trouble than others the same age?				
18. Speaks differently from others the same age (baby talk; stuttering; hard to understand)?				
19. Denies mistakes or blames others?				
20. Quarrelsome?				
21. Pouts and sulks?				
22. Steals?				

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	Not at all	Just a little	Pretty much	Very much
23. Disobedient?				
24. Worries more than others; (about being alone; illness; or death)?				
25. Fails to finish tasks?				
26. Feelings easily hurt?				
27. Bullies others?				
28. Unable to stop a repetitive activity?				
29. Cruel?				
30. Childish or immature (wants to help when not needed; clings; needs constant reassurance)?				
31. Distractibility or attention spans a problem?				
32. Headaches?				
33. Mood changes quickly and drastically?				
34. Doesn't like or follow rules and restrictions?				
35. Fights constantly?				
36. Doesn't get along well with siblings?				
37. Easily frustrated in efforts?				
38. Disturbs other children?				
39. Basically an unhappy child?				
40. Problems with eating (poor appetite)?				
41. Stomach aches?				
42. Problems with sleep (can't fall asleep; up too early; up at nighttime)?				
43. Other aches and pains?				
44. Vomiting or nausea?				
45. Feels cheated in family circle?				
46. Boasts and brags?				
47. Lets self be pushed around?				
48. Bowel problems (frequently loose; irregular habits; constipation)?				