## Pediatric Symptoms Checklist (PSC–17)

<table>
<thead>
<tr>
<th></th>
<th>Name of Person Completing this Form</th>
<th>Child’s Name</th>
<th>Child’s Date of Birth</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>First Name Last Name</td>
<td>First Name Last Name</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Please check the box under the heading that best describes your child or you.

**Internalizing**

1. Feels sad, unhappy
2. Feels hopeless
3. Is down on self
4. Worries a lot
5. Seems to be having less fun

**Attention**

6. Fidgety, unable to sit still
7. Daydreams too much
8. Distracted easily
9. Has trouble concentrating
10. Acts as if driven by a motor

**Externalizing**

11. Fights with other children
12. Does not listen to rules
13. Does not understand other people’s feelings
14. Teases others
15. Blames others for his/her troubles
16. Refuses to share
17. Takes things that do not belong to him/her

**For Office Use Only**

- (0) Never
- (1) Sometimes
- (2) Often

**Total Score**

A score of 15 or higher may indicate the need for an assessment by a qualified medical or mental health professional.