Attention type



Name of Child:	Filled by:	Date:	Birthdate:	Mail:	Code:
Γο be able to help in th accurate way possible.			-	out this question	inaire in the most
A - Main difficul	<u>ties</u>				
In what areas is he/s	she strong?				
Where do you see tl	ne main difficulties t	oday?			
Are there areas that	particularly need in	nprovement (lan	guage, friends, n	notor skills, pla	y, etc.)?

B – Checklist

Dear parent!

- Filling out the questionnaire accurately is very important for the success of your child's treatment.
- The answers are in relation to his condition without the effect of an ADHD drug.
- Note! The numbers from 1 to 4 are the frequency of the difficulty, not the level of difficulty.

Ple	ease specify how often these issues occur:	0 = Never / Not Applicable	1 = Rarely	2 : Occasio		ly	Fre	3 = que	: ently	4 = Very Frequently	Comments
1.	Easily distracted.				0	1	2	3	4		
2.	Difficulty sustaining att school or work.	ention span for most task	s, homework,	play,	0	1	2	3	4		
3.		when talking to him/her (eseemingly ignoring them).	.g. not listenii	ng to	0	1	2	3	4		
4.	* * * * * * * * * * * * * * * * * * * *	ing through, procrastinati difficulty finishing tasks to		g out	0	1	2	3	4		
5.		rder and organization of he, bag, closet, drawer, etc.		nt and	0	1	2	3	4		
6.	•	i.e. frequently late or hurried nework are "last minute" or t	•	nger than	0	1	2	3	4		
7.	Tendency to lose things	5.			0	1	2	3	4		
8.	Makes careless mistake	es, poor attention to detai	l.		0	1	2	3	4		
9.	Forgetful.				0	1	2	3	4		
10.	Restless, unusually acti	ve.			0	1	2	3	4		
11.	Trouble sitting still, fide	gety, constant motion (har	nds, feet, bod	y).	0	1	2	3	4		

Phone: 02-571-51-71 Deductions portfolio 943298810 Organization No. 580551083 pniot@hayeladimshelanu.org Fax: 02-579-0050 www.hayeladimshelanu.org

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Attention type

Please specify how often 0= 1= 2=				3 =	:	4 = Comments
these issues occur : Never / Not Applicable Rarely Occasion		ly	Frequently			Very Frequently Comments
12. Noisy, has trouble being quiet.	0	1	2	3	4	
13. Acts as if "driven by a motor"	0	1	2	3	4	
14. Talks excessively.	0	1	2	3	4	
15. Impulsive (doesn't think through comments or actions before they are said or done)	0	1	2	3	4	
16. Has a hard time waiting for his turn.	0	1	2	3	4	
17. Interrupts others, butts into others' conversations or games.	0	1	2	3	4	
18. Difficulty delaying gratification.	0	1	2	3	4	
19. Excessive or senseless worrying.	0	1	2	3	4	
20. Super organized, everything has to be in its place and order.	0	1	2	3	4	
21. Oppositional, argumentative.	0	1	2	3	4	
22. Strong tendency to get locked into negative thoughts, having the same thought/phrase over and over again.	0	1	2	3	4	
23. Tendency toward compulsive behavior.	0	1	2	3	4	
24. Intense dislike for change, reacts with frustration to unplanned scenarios	0	1	2	3	4	
25. Difficulty adapting to new situations.	0	1	2	3	4	
26. Tendency to hold grudges.	0	1	2	3	4	
27. Difficulty shifting attention from one subject to another.	0	1	2	3	4	
28. Difficulty finding alternative solutions.	0	1	2	3	4	
29. Tendency to cling to one's own opinion and not listen to others.	0	1	2	3	4	
30. He becomes stuck in his course of action and has difficulty adapting even if it is against his own benefit.	0	1	2	3	4	
31. Not aware that worries too much.	0	1	2	3	4	
32. Periods of extreme irritability or explosive with little provocation.	0	1	2	3	4	
33. Misinterprets comments or situations as negative when they are not.	0	1	2	3	4	
34. Irritability tends to build, then explodes, then recedes, often tired after a rage.				3	4	
35. Periods of spaciness or confusion.				3	4	
6. Periods of panic and/or fear for no specific reason.				3	4	
37. Imagines visual changes like seeing shadows or objects changing shape.	0	1	2	3	4	
38. Frequent periods of deja vu (the feeling of having experienced the same situation in the past even if it never happened).				3	4	
39. Hypersensitivity or mild paranoia.	0	1	2	3	4	
40. Headaches or abdominal pain of uncertain origin.	0	1	2	3	4	
41. History of a head injury (0=no damage, 4=severe damage).	0	1	2	3	4	
42. Dark thoughts, may involve suicidal or homicidal thoughts.	0	1	2	3	4	
43. Periods of forgetfulness or memory problems.	0	1	2	3	4	
44. Impatient.	0	1	2	3	4	
45. Dejected, disheartened.	0	1	2	3	4	

Deductions portfolio 943298810

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Attention type



Please specify how often	0=	1=	1 = 2 = Rarely Occasio				3 =	:	4 =	
these issues occur :	Never / Not Applicable	Rarely			onally		que	ently	Very Frequently	Comments
46. Tends to be negative.				0	1	2	3	4		
47. Low energy / apathy / p	passivity.			0	1	2	3	4		
48. Frequent irritability.				0	1	2	3	4		
49. Tendency to be socially	isolated.			0	1	2	3	4		
50. Frequent feelings of ho	pelessness, helplessness,	or excessive {	guilt.	0	1	2	3	4		
51. Does not enjoy things t	hat are usually considered	d fun.		0	1	2	3	4		
52. Sleep difficulties (too m	nuch or too little).			0	1	2	3	4		
53. Chronic low self-esteen	n.			0	1	2	3	4		
54. Angry or aggressive.				0	1	2	3	4		
55. Sensitive to noise, light	, clothes or touch.			0	1	2	3	4		
56. Frequent or cyclic mood	d changes (highs and lows	s).		0	1	2	3	4		
57. Inflexible, rigid in the w	ay of thinking.			0	1	2	3	4		
58. Difficulty accepting a reasked several times.	equest that goes against h	is will, even it	it is	0	1	2	3	4		
59. Periods of insensitive, r	mean, or nasty behavior to	his surround	dings.	0	1	2	3	4		
60. Periods of increased sp	eech, talkativeness.			0	1	2	3	4		
61. Periods of increased im	pulsivity (act before thou	ght).		0	1	2	3	4		
62. Unpredictable behavior	r.			0	1	2	3	4		
63. Grandiose thinking (ove	erly confident or arrogant	attitude).		0	1	2	3	4		
64. Looks anxious or fearfu	l.			0	1	2	3	4		
65. Predicts the worst				0	1	2	3	4		
66. Freezes in social situation	ons.			0	1	2	3	4		
67. Tension that manifests its	elf physically: headaches or §	great muscle te	ension.	0	1	2	3	4		
68. Conflict avoidant even	when needed.			0	1	2	3	4		
69. Fear of being judged.				0	1	2	3	4		
70. Excessive motivation.				0	1	2	3	4		

(Based on Dr. Amen Brain Test Questionnaire).

additional Notes:	