



Conners Adult ADHD Rating Scales 2nd Edition (CAARS™ 2)

OBSERVER

Single-Rater Report

C. Keith Conners, Ph.D., Drew Erhardt, Ph.D., & Elizabeth P. Sparrow, Ph.D.

CLIENT

Name/ID: Juan Alvarez/123
Date of Birth: March 24, 2002
Age: 21
Gender:

OBSERVER

Name/ID: Sonia Alvarez/123
Client's Relationship to Observer: Spouse/Domestic Partner/Romantic Partner

ADMINISTRATION DETAILS

Administration Date: April 29, 2023
Assessment Language: Spanish

SELECTED REFERENCE GROUP(S)

Principal Reference Sample: Normative Sample–Combined Gender
Additional Reference Sample(s): Normative Sample Gender Specific–Males

Normative Age Group: 18 to 24 years

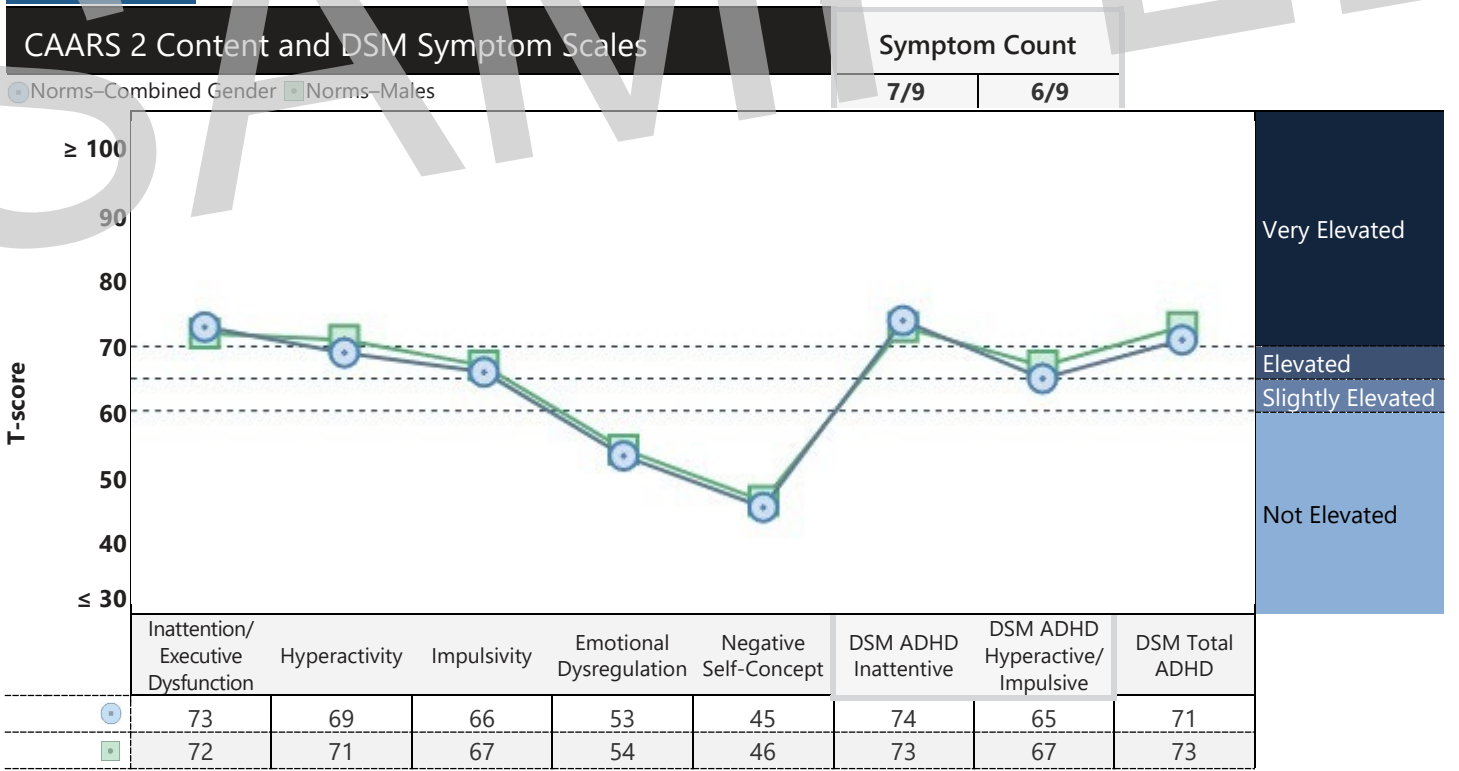
This computerized report is an interpretive aid intended for use by qualified professionals only. It should not be used as the sole criterion for clinical diagnosis or intervention. CAARS 2 results should be combined with information gathered from other psychometric measures, interviews, observations, and review of available records. This report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Responses to specific items should be reviewed to ensure that these typical interpretations apply to the individual being described. **Parts of this report contain copyrighted material, including test items. If it is necessary to provide a copy of this report to anyone other than the examiner, sections containing copyrighted material must be removed.**

OVERVIEW

! Critical >> Follow-Up ? Could Not Be Scored

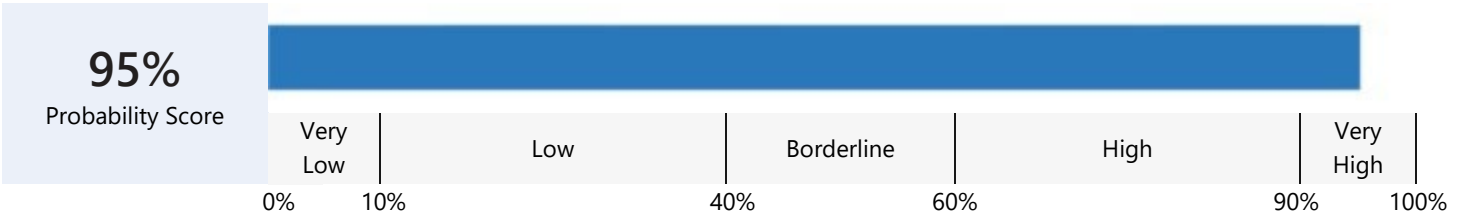
Response Style Analysis			
10	>> Negative Impression Index Raw Score	4	>> Inconsistency Index Raw Score
Warrants follow-up. May reflect an attempt to present an unrealistically negative impression, or an exaggerated description of problems.		Warrants follow-up. May reflect inconsistent, careless, or random responding.	
0	Omitted Item(s)	7.2	Pace Average # of items/minute
No items were omitted.		Within the expected range. Typical Pace.	

Associated Clinical Concern Items			
Critical Items	Suicidal thoughts/attempts Never	Self-injury Never	
	No reported history of suicidal thoughts/attempts.	No reported history of self-injurious behaviors.	
Screening Items	>> Anxiety/worry Pretty much true; Often/Quite a bit	>> Sadness Pretty much true; Often/Quite a bit	
	Follow-up is recommended.	Follow-up is recommended.	



Note(s). DSM-5-TR requires ≥ 5/9 Inattentive and/or ≥ 5/9 Hyperactive/Impulsive symptoms to meet Criterion A for ADHD in adults. DSM Symptom Counts contribute to diagnostic assessments but are not sufficient to determine a diagnosis (see CAARS 2 Manual).

CAARS 2-ADHD Index



Impairment & Functional Outcome Items

Item Stem	Rating	Elevation
Bothered by the things endorsed on the CAARS 2	Never/Rarely	Not Elevated
Things endorsed on the CAARS 2 interfere with life	Never/Rarely	Not Elevated
Problems in romantic/marital relationship(s)	Not true at all; Never/Rarely	Not Elevated
Problems in relationships with family members	Just a little true; Occasionally	Not Elevated
Problems in relationships with friends, co-workers, or neighbors	Not true at all; Never/Rarely	Not Elevated
Problems at work and/or school	Not true at all; Never/Rarely	Not Elevated
Has a harder time with things than other people do	Just a little true/Occasionally	Not Elevated
Underachiever	Not true at all; Never/Rarely	Not Elevated
Sleep problems	Not true at all; Never/Rarely	Not Elevated
Problems managing money	Just a little true/Occasionally	Not Elevated
Neglects family/household responsibilities	Not true at all; Never/Rarely	Not Elevated
Risky driving	Not true at all; Never/Rarely	Not Elevated
Problems due to time spent online	Not true at all; Never/Rarely	Not Elevated

Additional Questions

Please describe any other issues or problems.

Juan necesita muchos recordatorios, así que trato de darle nuestro horario semanal. Pero incluso entonces, necesito recordarle todos los días lo que necesito que haga ese día.

What strengths or skills does this person have?

Juan es un esposo amoroso y un buen padre. Trabaja duro para nuestra familia. Es amable y paciente con nuestros hijos.

CAARS 2 SCALES

Content Scales						
	Raw Score	T-score	90% CI	Percentile	Guideline	# of Elevated Items
Inattention/ Executive Dysfunction	65	73	70-76	98th	Very Elevated	23/30
Hyperactivity	21	69	65-73	94th	Elevated	7/13
Impulsivity	22	66	61-71	92nd	Elevated	9/13
Emotional Dysregulation	9	53	48-58	70th	Not Elevated	2/9
Negative Self-Concept	3	45	40-50	35th	Not Elevated	1/7

Note(s). CI = Confidence Interval.

DSM Symptom Scales						
	Raw Score	T-score	90% CI	Percentile	Guideline	Symptom Count ⓘ
ADHD Inattentive Symptoms	25	74	70-78	97th	Very Elevated	7/9
ADHD Hyperactive/ Impulsive Symptoms	17	65	60-70	90th	Elevated	6/9
Total ADHD Symptoms	42	71	66-76	95th	Very Elevated	n/a

Note(s). CI = Confidence Interval.

ⓘ DSM Symptom Count scores contribute to diagnostic assessment but are not sufficient for determining a diagnosis. See the CAARS 2 Manual for interpretive considerations. A Symptom Count of at least 5/9 Inattentive Symptoms and/or at least 5/9 Hyperactive/Impulsive Symptoms is required to meet DSM-5-TR Criterion A for ADHD in adults. A Symptom Count of at least 5/9 on both Inattentive Symptoms and Hyperactive/Impulsive Symptoms is required to meet DSM-5-TR Criteria for ADHD Combined in adults.

n/a = Not Applicable. Symptom Counts are not applicable to DSM Total ADHD Symptoms. See the CAARS 2 Manual for details.

CAARS 2-ADHD Index			
	Raw Score	Probability Score	Guideline
CAARS 2-ADHD Index	22	95%	Very High

ITEM RESPONSES

Item #	Rating	Item #	Rating	Item #	Rating	Item #	Rating
1.	3	25.	2	49.	2	73.	1
2.	0	26.	0	50.	2	74.	2
3.	3	27.	3	51.	2	75.	1
4.	0	28.	1	52.	3	76.	1
5.	0	29.	2	53.	2	77.	1
6.	3	30.	3	54.	0	78.	3
7.	1	31.	3	55.	0	79.	2
8.	1	32.	2	56.	2	80.	1
9.	2	33.	3	57.	3	81.	0
10.	2	34.	1	58.	2	82.	0
11.	1	35.	3	59.	3	83.	0
12.	2	36.	0	60.	1	84.	1
13.	0	37.	3	61.	0	85.	0
14.	1	38.	0	62.	3	86.	0
15.	2	39.	3	63.	3	87.	1
16.	2	40.	2	64.	3	88.	0
17.	2	41.	3	65.	2	89.	0
18.	2	42.	2	66.	2	90.	0
19.	2	43.	2	67.	2	91.	0
20.	1	44.	1	68.	2	92.	1
21.	2	45.	2	69.	1	93.	0
22.	0	46.	0	70.	3	94.	0
23.	1	47.	1	71.	0	95.	0
24.	0	48.	2	72.	2		

? = Omitted item

Response Key for items 1–80, 83–88, 91–95:

0 = Not true at all; Never/Rarely

1 = Just a little true; Occasionally

2 = Pretty much true; Often/Quite a bit

3 = Completely true; Very often/Always

DK = Don't Know (only available as an option on items 83–86 and 91–95)

n/a = Not Applicable (only available as an option on items 83–86 and 94)

Response Key for items 81–82:

0 = Never/Rarely

1 = Just a little/Occasionally

2 = Often/Quite a bit

3 = Very often/Always

Response Key for items 89–90:

0 = Never

1 = Rarely

2 = Just a little/Occasionally

3 = Often/Quite a bit

4 = Very often/Always

DK = Don't Know

GLOSSARY

This glossary summarizes content, scores, and interpretive guidelines for the CAARS 2 Observer. Please refer to the CAARS 2 Manual for more information about interpretation and the development of these scores.

Response Style Analysis

This section presents a set of metrics that describe a rater’s response style. If any of these metrics are flagged in the report, further exploration is needed to determine if and how such findings might impact the interpretation of the CAARS 2 results.

Metric	Description	Interpretation
Validity Scales	Negative Impression Index Identifies an unrealistically negative or possibly exaggerated response style.	Scores of 7 or higher warrant follow-up, as they may reflect the rater’s attempt to present an unfavorable impression. Review the Items by Scale section of the report and other sources of information to determine if this score reflects ratings that are unrealistically negative, exaggerated descriptions of problems, and/or accurate ratings of problems that rarely occur at the level endorsed.
	Inconsistency Index Describes inconsistent response patterns.	Scores of 4 or higher warrant follow-up. Review the Items by Scale section of the report and other sources of information to determine if this score reflects inconsistent, careless, or random responding; comprehension difficulties; or the rater’s interpretation of subtle wording differences within an item pair.
Omitted Items	Provides the total number of items omitted by the rater.	Items may be omitted by the rater for a variety of reasons, such as avoidance of particular content, careless responding due to low levels of motivation, or a misunderstanding of the directions to complete all items. Reviewing the specific items omitted can help in determining whether they are randomly distributed or reflect one or more common themes.
Pace (Online Administration Only)	Provides the average number of items the rater completed per minute.	A pace of ≥ 15.0 items per minute is an unusually fast pace , which could result from a variety of factors (e.g., reading items quickly, giving little consideration to responses, rushing). A pace of < 1.0 item per minute is an unusually slow pace , which could result from a variety of factors (e.g., interruptions, comprehension difficulties, fatigue, extreme deliberation).

Associated Clinical Concern Items

These four items assess areas that may require immediate clinical attention or further follow-up.

Item	Description	Interpretation
Critical Items	Two items, one that asks about suicidal thoughts/attempts and another that asks about self-injury. Note that the time frame for these items is the individual's "entire life" rather than "in general."	The Critical Items are flagged if endorsed at any level higher than "Never." If flagged, immediate follow-up is strongly recommended/critical to determine if this is a <i>current</i> concern, a report of <i>past</i> suicidality/self-injury, or both, and to assess the nature and severity of the suicidality or self-injury along with the need for any protective interventions. If the rater provided a response of Don't Know, assess for this critical content through other sources, particularly self-report. Follow-up with other sources, particularly with the client, if the rater omitted or responded Don't Know to either of the Critical Items to gather this important information.
Screening Items	Two items, one that asks about anxiety/worry and another that asks about sadness.	The Screening Items are flagged when endorsed at a level higher than what is typical for the selected Normative Sample. If flagged, follow-up is recommended to assess the nature and severity of the anxiety and/or sadness.

CAARS 2 Content Scales

The five CAARS 2 Content Scales capture information about key areas that are often impacted by ADHD in adults.

Scale	Description	Interpretation
Inattention/ Executive Dysfunction	Items about difficulties with paying attention to details, concentrating, staying focused, remembering tasks, planning, time management, prioritizing, and organizing.	<p>Results of the CAARS 2 Content Scales are reported as T-scores with confidence intervals and percentiles. An elevated T-score indicates higher ratings in that area than are expected for an average individual in the selected reference group. The higher the T-score, the greater the difference between the individual being described and what is typical for the reference sample.</p> <ul style="list-style-type: none"> • Very Elevated: T-score ≥ 70 • Elevated: T-score = 65 to 69 • Slightly Elevated: T-score = 60 to 64 • Not Elevated: T-score < 60
Hyperactivity	Items about seeming restless, having difficulty sitting still, tapping hands or feet, talking too much, distracting others, and having trouble doing activities quietly.	
Impulsivity	Items about seeming impatient, rushing through things, interrupting others, blurting out answers, acting before thinking, and having trouble waiting.	
Emotional Dysregulation	Items about difficulty controlling emotions, such as getting easily irritated or frustrated, overreacting, and having angry outbursts.	
Negative Self- Concept	Items about low self-confidence, feeling like a failure, and self-criticism.	

DSM Symptom Scales

Results from the CAARS 2 DSM Symptom Scales describe ratings from groups of items that correspond to the two symptom groups (i.e., Inattention; Hyperactivity/Impulsivity) represented in Criterion A for ADHD in the DSM-5-TR. It is critical to remember that these scores cannot be used to determine the presence of Criterion A symptoms per se but can be an important component of the multi-measure, multi-informant approach to make that determination. Diagnostic conclusions also require consideration of additional DSM-5-TR criteria, including age of onset (Criterion B), pervasiveness across settings (Criterion C), impairment (Criterion D), and ruling out competing diagnoses or alternative explanations for the symptoms (Criterion E).

Scale	Description	Interpretation
DSM ADHD Inattentive Symptoms	Items representing the nine DSM-5-TR ADHD Criterion A Inattention symptoms.	Results of the CAARS 2 DSM Symptom Scales are reported as T-scores with confidence intervals and percentiles (see Content Scales for interpretation of T-scores). DSM Symptom Scale T-scores and percentiles on the CAARS 2 are relative scores, comparing an individual to the selected reference group. These scores help users assess the first part of the DSM-5-TR Criterion A; that symptoms must be inconsistent with developmental level.
DSM ADHD Hyperactive/Impulsive Symptoms	Items representing the nine DSM-5-TR ADHD Criterion A Hyperactivity and Impulsivity symptoms.	Symptom Counts are also reported for the ADHD Inattentive Symptoms and ADHD Hyperactive/Impulsive Symptoms scales. No Total Symptom Count is calculated as the DSM-5-TR does not refer to a "total" score. Symptom Counts refer to the number of symptoms endorsed at a high enough level to meet the DSM-5-TR specification of "often." These are absolute counts, rather than norm-referenced values. The DSM-5-TR requires:
DSM Total ADHD Symptoms	Items from the DSM ADHD Inattentive Symptoms Scale and DSM ADHD Hyperactive/Impulsive Symptoms Scale. This scale provides a dimensional look at symptoms of ADHD.	<ul style="list-style-type: none"> • 5 or more inattention symptoms for ADHD Predominantly inattentive presentation, • 5 or more hyperactivity/impulsivity symptoms for ADHD Predominantly hyperactive/impulsive presentation, and • 5 or more inattention symptoms <i>and</i> 5 or more hyperactivity/impulsivity symptoms for ADHD Combined presentation.

CAARS 2–ADHD Index

This section presents a set of 12 items that best differentiates people diagnosed with ADHD from people in the general population.

Scale	Description	Interpretation
CAARS 2–ADHD Index	Suggests the probability of an ADHD classification by identifying whether ratings of the individual are more similar to ratings of individuals who have an ADHD diagnosis or individuals from the general population, after accounting for age.	<p>The CAARS 2–ADHD Index is reported as a probability score along a continuum ranging from 1% to 99%.</p> <ul style="list-style-type: none"> Very High (90% to 99%) and High (60% to 89%) probability scores indicate relatively high levels of similarity with age-matched peers who have been diagnosed with ADHD (and low similarity with the general population). Borderline (40% to 59%) probability scores do not have clear similarity to one group over the other (i.e., individuals who have ADHD versus individuals in the general population). Low (10% to 39%) and Very Low (1% to 9%) probability scores indicate relatively low levels of similarity with the ADHD comparison group (and high similarity with the general population).

Impairment & Functional Outcome Items

The CAARS 2 Impairment & Functional Outcome Items describe levels of distress and impairment, including both general domains and specific areas of functioning that can be impacted by ADHD symptoms.

Scale	Description	Interpretation
Impairment & Functional Outcome Items	<p>Item content includes:</p> <ul style="list-style-type: none"> how much issues endorsed on the CAARS 2 bother the individual being rated or interfere with their life in general, social functioning (including relationships with romantic/marital partners, family members, friends/co-workers/neighbors), occupational/academic functioning, and other functional areas including achievement, sleep, financial management, domestic responsibilities, driving, and time spent online. 	<p>Elevated ratings may indicate distress/impairment and suggest possible treatment targets. Item-level scores are considered elevated when they are endorsed at higher levels than expected for most of the selected Principal Reference Sample (specifically, any level of endorsement that falls in the top quartile of the response distribution is noted as an Elevated item).</p>



CAARS 2 Observer Single-Rater Report for Juan Alvarez/123

Principal Reference Sample: 18 to 24-year-olds (Normative)

Administration Date: April 29, 2023

ITEMS BY SCALE

Test users are responsible for ensuring the confidentiality and security of test materials, including test items and scales, in accordance with professional standards and applicable legislation. MHS test materials are protected by various intellectual property laws, including copyright and trademark laws.

The following section of the report, entitled Items by Scale, contains test items and scales that are copyrighted/trade secret material. Disclosure of these materials is prohibited by law. In the event that disclosure of the report becomes necessary or is required by law, **the section entitled Items by Scale must be removed** before any such disclosure.

Note that the test was administered in Spanish; however, the English item text is displayed in this section.

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

RESPONSE STYLE ANALYSIS

The ratings provided are the original responses. Scores of 2 or 3 on the six items comprising the Negative Impression Index are used to calculate the raw score. Ratings with a difference (Item Pair Score) of 2 or 3 on any of the seven pairs of items that constitute the Inconsistency Index are used to calculate the raw score. Please see the CAARS 2 Manual for details.

Negative Impression Index

Item #	Item Text <i>In general, this person...</i>	Rating	Item Score
2	tries to follow the rules. (R)	Not true at all; Never/Rarely	3
18	is unable to control their own behavior.	Pretty much true; Often/Quite a bit	2
35	is unable to focus on anything for longer than one minute.	Completely true; Very often/Always	3
50	throws tantrums.	Pretty much true; Often/Quite a bit	2
55	is unable to pay attention to anything.	Not true at all; Never/Rarely	0
71	finds it impossible to get things done because they forget how to do them.	Not true at all; Never/Rarely	0

Note. (R) = Reverse-Scored Item.

Inconsistency Index

Pair	Item #	Item Text <i>In general, this person...</i>	Rating	Item Pair Score
1	31	has difficulty paying attention.	Completely true (Very often/Always)	0
	41	is easily distracted.	Completely true (Very often/Always)	
2	21	has difficulty prioritizing the things they need to do.	Pretty much true (Often/Quite a bit)	0
	64	has trouble finishing tasks at home, work, or school.	Completely true (Very often/Always)	
3	32	feels like a failure.	Pretty much true (Often/Quite a bit)	2
	36	expresses lack of confidence in self because of past failures.	Not true at all (Never/Rarely)	
4	13	lacks confidence in themself.	Not true at all (Never/Rarely)	0
	59	believes in themself. (R)	Completely true (Very often/Always)	
5	66	is irritable.	Pretty much true (Often/Quite a bit)	0
	76	is easily frustrated.	Just a little true (Occasionally)	
6	68	has a hard time doing things that have multiple steps.	Pretty much true (Often/Quite a bit)	0
	79	has difficulty paying close attention to details.	Pretty much true (Often/Quite a bit)	
7	39	forgets to do things.	Completely true (Very often/Always)	2
	47	is forgetful.	Just a little true (Occasionally)	

Note. (R) = Reverse-Scored Item.

Confidential – contains proprietary information

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

The following response keys apply to all remaining tables in this section.

Item Score:

- 0 = Not true at all; Never/Rarely
- 1 = Just a little true; Occasionally
- 2 = Pretty much true; Often/Quite a bit
- 3 = Completely true; Very often/Always
- ? = Omitted item

(R) = Item was reverse-scored:

- 3 = Not true at all; Never/Rarely
- 2 = Just a little true; Occasionally
- 1 = Pretty much true; Often/Quite a bit
- 0 = Completely true; Very often/Always
- ? = Omitted item

CONTENT SCALES

Inattention/Executive Dysfunction

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
1^	loses or misplaces things that they need.	3	Elevated
3	has difficulty shifting their focus when needed.	3	Elevated
6	seems to concentrate only on things that are interesting to them.	3	Elevated
8	needs a deadline to get things done.	1	Not Elevated
15	is late for things like meetings, appointments, or social events.	2	Elevated
17^	has difficulty staying focused.	2	Elevated
19	wastes time.	2	Elevated
21	has difficulty prioritizing the things they need to do.	2	Elevated
23^	has problems organizing tasks and activities.	1	Not Elevated
25	needs reminders to get things done.	2	Not Elevated
27	procrastinates.	3	Elevated
29^	makes careless mistakes.	2	Elevated
31	has difficulty paying attention.	3	Elevated
33	has a hard time planning ahead.	3	Elevated
37	misses deadlines or due dates.	3	Elevated
39^	forgets to do things.	3	Elevated
41^	is easily distracted.	3	Elevated
43^	has trouble following through on instructions.	2	Elevated
45	is inconsistent.	2	Elevated
47	is forgetful.	1	Not Elevated
49	is inattentive.	2	Elevated
51	forgets to check things (like their calendar, to-do list, or due dates).	2	Elevated
58	sometimes overfocuses on details; at other times appears distracted by everything going on around them.	2	Elevated

...Table continues on next page.

Confidential – contains proprietary information

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

Inattention/Executive Dysfunction (continued)

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
60	loses focus during conversations.	1	Not Elevated
64^	has trouble finishing tasks at home, work, or school.	3	Elevated
68	has a hard time doing things that have multiple steps.	2	Elevated
70^	seems to dislike having to stay focused for a long time.	3	Elevated
73^	has trouble listening to what people say to them.	1	Not Elevated
77	has trouble getting started on a task.	1	Not Elevated
79^	has difficulty paying close attention to details.	2	Elevated

Note. ^Item also appears on the DSM ADHD Inattentive Symptoms scale.

Hyperactivity

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
4^	talks too much.	0	Not Elevated
11	is overactive.	1	Not Elevated
20^	appears to have difficulty staying still.	1	Not Elevated
22^	moves around even when they should be still.	0	Not Elevated
28	has difficulty being quiet.	1	Not Elevated
40^	has trouble doing leisure activities quietly.	2	Elevated
46^	leaves their seat when they should stay seated.	0	Not Elevated
52^	seems restless.	3	Elevated
57	talks when they should be quiet, like during movies, lectures, or performances.	3	Elevated
63	distracts people.	3	Elevated
65^	fidgets.	2	Elevated
72^	taps their hands or feet.	2	Elevated
78	appears to be restless even when sitting still.	3	Elevated

Note. ^Item also appears on the DSM ADHD Hyperactive/Impulsive Symptoms scale.

Confidential – contains proprietary information

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

Impulsivity

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
9^	gives answers before questions have been completed.	2	Elevated
12	has difficulty waiting to speak in conversations.	2	Elevated
16	annoys other people without meaning to.	2	Elevated
24	would rather get a small reward right away instead of waiting for a big reward later.	0	Not Elevated
30	does risky things without thinking.	3	Elevated
38	says things without thinking.	0	Not Elevated
44^	interrupts people.	1	Not Elevated
48^	intrudes on others' activities.	2	Elevated
53^	has difficulty waiting for their turn.	2	Elevated
56	seems impatient.	2	Elevated
62	rushes through things.	3	Elevated
67	acts before thinking.	2	Elevated
75	is impulsive.	1	Not Elevated

Note: ^Item also appears on the DSM ADHD Hyperactive/Impulsive Symptoms scale.

Emotional Dysregulation

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
7	has a hard time calming down.	1	Not Elevated
10	has difficulty controlling their anger.	2	Elevated
14	has trouble hiding their emotions.	1	Not Elevated
26	has difficulty controlling their emotions.	0	Not Elevated
34	says things that they shouldn't when upset.	1	Not Elevated
61	has moods that change quickly.	0	Not Elevated
66	is irritable.	2	Elevated
76	is easily frustrated.	1	Not Elevated
80	overreacts.	1	Not Elevated

Confidential – contains proprietary information

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

Negative Self-Concept

Item #	Item Text <i>In general, this person...</i>	Item Score	Elevation
5	sees himself as inferior to others.	0	Not Elevated
13	lacks confidence in himself.	0	Not Elevated
32	feels like a failure.	2	Elevated
36	expresses lack of confidence in self because of past failures.	0	Not Elevated
54	is self-critical.	0	Not Elevated
59	believes in himself. (R)	0	Not Elevated
69	avoids new challenges because they lack confidence.	1	Not Elevated

DSM SYMPTOM SCALES

Note. Checkmarks in the Criterion Status column contribute to the Symptom Count for the scale. Please see the CAARS 2 Manual for more details.

DSM ADHD Inattentive Symptoms

DSM-5-TR Criterion A	Item #	Item Text <i>In general, this person...</i>	Item Score	Criterion Status
1a	29 OR	makes careless mistakes.	2	✓
	79	has difficulty paying close attention to details.	2	
1b	17	has difficulty staying focused.	2	✓
1c	73	has trouble listening to what people say to them.	1	
1d	43 AND	has trouble following through on instructions.	2	✓
	64	has trouble finishing tasks at home, work, or school.	3	
1e	23	has problems organizing tasks and activities.	1	
1f	70	seems to dislike having to stay focused for a long time.	3	✓
1g	1	loses or misplaces things that they need.	3	✓
1h	41	is easily distracted.	3	✓
1i	39	forgets to do things.	3	✓

Confidential – contains proprietary information

This section of the report contains copyrighted items and information that are not intended for public disclosure. If it is necessary to provide a copy of the report to anyone other than the examiner, **this section must be removed.**

DSM ADHD Hyperactive/Impulsive Symptoms

DSM-5-TR Criterion A	Item #	Item Text <i>In general, this person...</i>	Item Score	Criterion Status
2a	65 OR	fidgets.	2	✓
	72	taps their hands or feet.	2	
2b	46	leaves their seat when they should stay seated.	0	
2c	52	seems restless.	3	✓
2d	40	has trouble doing leisure activities quietly.	2	✓
2e	20 OR	appears to have difficulty staying still.	1	
	22	moves around even when they should be still.	0	
2f	4	talks too much.	0	
2g	9	gives answers before questions have been completed.	2	✓
2h	53	has difficulty waiting for their turn.	2	✓
2i	44 OR	interrupts people.	1	✓
	48	intrudes on others' activities.	2	

CAARS 2-ADHD INDEX

CAARS 2-ADHD Index

Item #	Item Text <i>In general, this person...</i>	Item Score
13	lacks confidence in themselves.	0
17	has difficulty staying focused.	2
21	has difficulty prioritizing the things they need to do.	2
25	needs reminders to get things done.	2
27	procrastinates.	3
31	has difficulty paying attention.	3
41	is easily distracted.	3
54	is self-critical.	0
57	talks when they should be quiet, like during movies, lectures, or performances.	3
58	sometimes overfocuses on details; at other times appears distracted by everything going on around them.	2
75	is impulsive.	1
87	has a harder time with things than other people do.	1

Confidential – contains proprietary information