



Conners' Adult ADHD Rating Scales—Observer Report: Long Version (CAARS—O:L)

By C. Keith Conners, Ph.D., Drew Erhardt, Ph.D., and Elizabeth Sparrow, Ph.D.

Profile Report

Client Name: **Tiffany Cha**

Age: 28

Gender: Female

Observer's Name: Ying Kit Chui

Observer's Relation: Other

Observer's Age: 29

Observer's Gender: Male

Duration: 14 minutes, 57 seconds

Administration Date: May 02, 2023



Copyright © 2002 Multi-Health Systems Inc. All rights reserved.
P.O. Box 950, North Tonawanda, NY 14120-0950
3770 Victoria Park Ave., Toronto, ON M2H 3M6

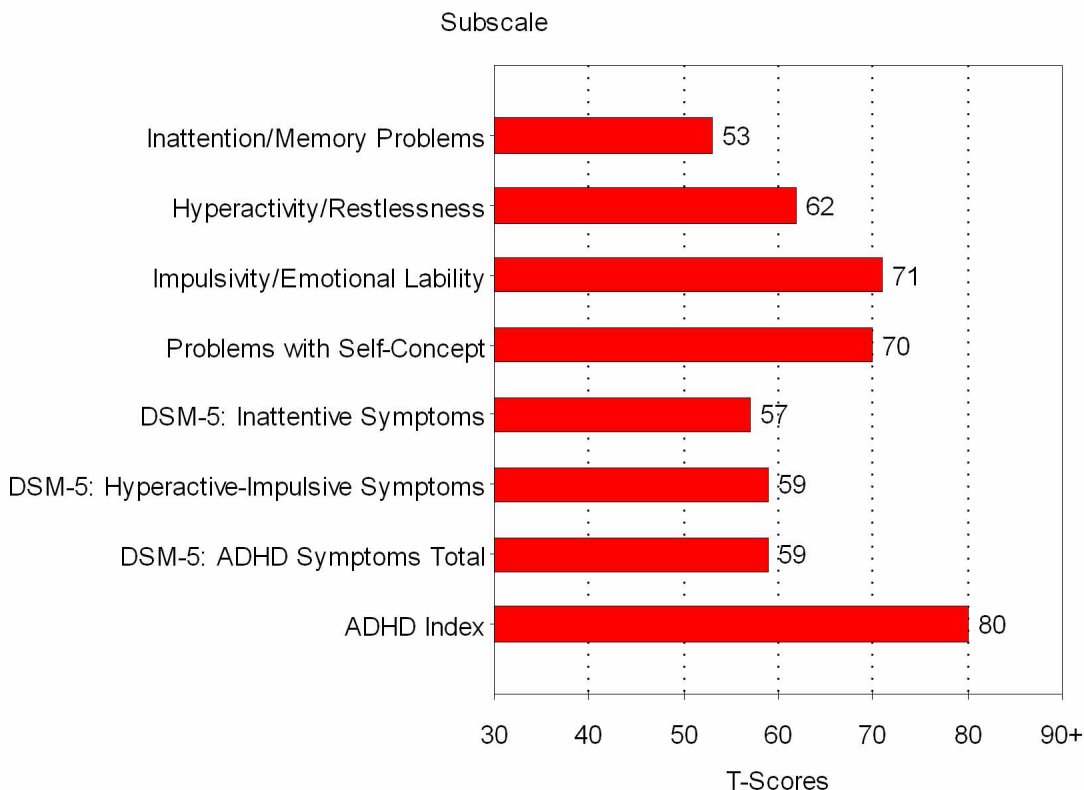
Introduction

Conners' Adult ADHD Rating Scales–Observer: Long Version (CAARS–O:L) is an assessment tool that prompts an observer to provide valuable information about the client. This instrument is helpful when considering a diagnosis of ADHD or related problem. The normative sample includes 943 adults. This report provides information about the adult's score, how he or she compares to other adults, and what subscales are elevated. See the Conner's Adult ADHD Rating Scales Technical Manual (published by MHS) for more information about the instrument.

This computerized report is an interpretive aid and should not be used as the sole basis for clinical diagnosis or intervention. These results are most useful when combined with other sources of relevant information. CAARS results are based on the individual's current functioning and thus cannot be used to establish the childhood onset of symptoms, which is necessary for diagnosis. The report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Test users should review the individual's responses to ensure that these generic interpretations apply. Highly idiosyncratic response patterns must be explored in other ways on a case-by-case basis.

CAARS–O:L Subscale T-Scores

The following graph provides T-scores for each of the CAARS–O:L subscales.



Summary of Scores

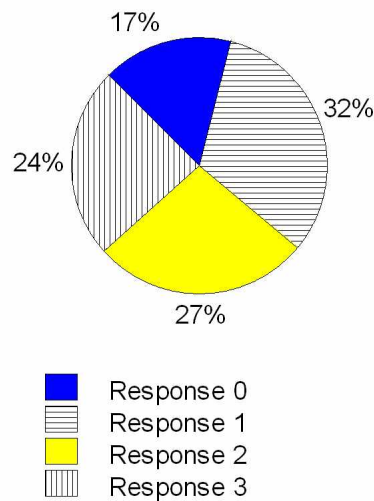
The following table summarizes Tiffany's scores and gives general information about how she compares to the normative group.

Measure	Raw Score	T-Score	Guideline	Common Characteristics of High Scorers
Inattention/Memory Problems	12	53	Average (typical score: should not raise concern).	Difficulties may include trouble concentrating, difficulty planning or completing tasks, forgetfulness, absent-mindedness, being disorganized.
Hyperactivity/Restlessness	20	62	Mildly atypical (possible significant problem).	Difficulties may include problems with working at the same task for long periods of time, feeling more restless than others seems to be, fidgeting.
Impulsivity/Emotional Lability	26	71	Markedly atypical (indicates significant problem).	Difficulties may include engaging in more impulsive acts than others do, low frustration tolerance, quick and frequent mood changes, feeling easily angered and irritated by people.
Problems with Self-Concept	14	70	Moderately atypical (indicates significant problem).	Difficulties may include poor social relationships, low self-esteem and self-confidence.
DSM-5: Inattentive Symptoms	11	57	Slightly atypical (borderline: should raise concern).	Behave in a manner consistent with the Inattentive Presentation of ADHD, described in the DSM-5.
DSM-5: Hyperactive-Impulsive Symptoms	11	59	Slightly atypical (borderline: should raise concern).	Behave in a manner consistent with the Hyperactive-Impulsive Presentation of ADHD, described in the DSM-5.
DSM-5: ADHD Symptoms Total	22	59	Slightly atypical (borderline: should raise concern).	Behave in a manner consistent with the DSM-5 diagnostic criteria for Combined Presentation of ADHD.
ADHD Index	27	80	Markedly atypical (indicates significant problem).	Identifies individuals 'at risk' for ADHD.
Inconsistency Index	8	N/A	Probably invalid.	High scores indicate that the participant may have been responding haphazardly, may have been unmotivated, and/or may have been trying to distort his or her results.

Item Response Table

The following response values were entered for the items on CAARS-O:L.

Item	Response	Item	Response
1.	1	35.	2
2.	0	36.	1
3.	1	37.	2
4.	1	38.	1
5.	0	39.	3
6.	3	40.	3
7.	0	41.	2
8.	3	42.	1
9.	1	43.	2
10.	0	44.	2
11.	0	45.	3
12.	1	46.	2
13.	1	47.	2
14.	1	48.	0
15.	3	49.	1
16.	0	50.	2
17.	1	51.	1
18.	2	52.	1
19.	3	53.	3
20.	2	54.	2
21.	0	55.	2
22.	1	56.	1
23.	2	57.	1
24.	3	58.	1
25.	2	59.	3
26.	3	60.	1
27.	3	61.	3
28.	3	62.	2
29.	2	63.	2
30.	3	64.	3
31.	2	65.	0
32.	0	66.	1
33.	1		
34.	0		

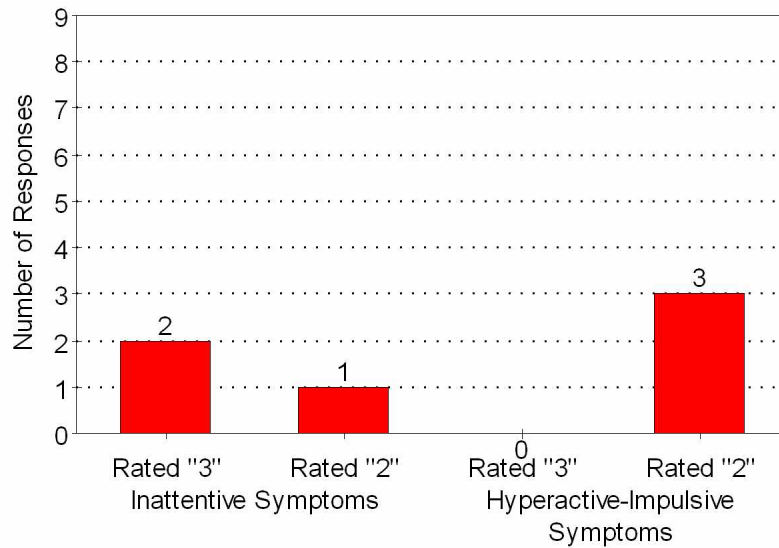


Response Key:

0 = Not at all, Never
 1 = Just a little, Once in a while
 2 = Pretty much, Often
 3 = Very much, Very frequently
 ? = Omitted Item

DSM-5 Subscales: Elevated Responses

The following graph shows the number of items for which the observer answered "Very Much, Very Frequently"(3) or "Pretty Much, Often" (2). These answers are grouped by DSM-5 subscale.



Date Printed: May 04, 2023

End of Report