## Symptom Response Report



PATIENT ID

Doctordemoclin012

AGE 14 GENDER

INTERVIEW SOURCE

INTERVIEW DATE

Female

Doctor

10/08/2021

ADMINISTERED BY

Module Name	QID	Seq_ID	Question Text	Response	Comments
Intro	1	0.0.0.Q1	Thanks for agreeing to do this interview. I am going to be asking you a lot of different questions about your moods and behavior, but first I'd like to ask you some background questions.  Click on the comments link on any page if you'd like to provide some comments.		
	2	0.0.0.Q2	How old are you?	age:14	
	3	0.0.0.Q3	What sex were you assigned at birth?	Female	
	1798	0.0.0.Q77	What is your ethnicity? Hispanic or Latino?	No	
	1799	0.0.0.Q78	What is your race? Choose all that apply.	Asian,	
	4	0.0.0.Q4	Who do you live with? Click all that apply.	Biological mother,Biological father,Brother(s),	
	11	0.0.0.Q11	Who in your family or of the people you are living with would you say you're closest with?	Mom	

12	0.0.0.Q12	Is there anyone in your family or the people you are living with that you really don't get along with?	No
13	0.0.0.Q14	What grade are you in?	9th
14	0.0.0.Q15	Have you ever repeated a grade?	No
15	0.0.0.Q16	What kind of grades do you get on average?	As
16	0.0.0.Q17	Has there been a drop in your grades in the past year?	Yes
17	0.0.0.Q18	Are you involved in any extracurricular activities at school?	Yes
18	0.0.0.Q19	Which one are you involved in? Click all that apply:	Theatre,
19	0.0.0.Q20	In the past year, have you had any detentions or suspensions?	No
21	0.0.0.Q22	Are you involved in any activities outside of school? Click all that apply:	None,
22	0.0.0.Q23	Do you have a best friend?	Yes
23	0.0.0.Q24	How long have you been friends?	1-2 years
24	0.0.0.Q25	Do you have a regular group of kids you hang out with at school or in your neighborhood?	Yes
25	0.0.0.Q26	How long have you hung out	1-2 years

			together?	
	26	0.0.0.Q27	Do you have any problems with bullying at school or in your neighborhood?	Yes
	1908	0.0.0.Q82	What is your gender identity?	Female,
	1909	0.0.0.Q83	What is your sexual orientation?	Bisexual,
	30	0.0.0.Q31	Has this caused any problems for you with your family or with kids at school?	Some
	31	0.0.0.Q32	Below is a list of things kids often have to deal with. Click all that apply to you:	Conflict with friends, Conflict with parents/guardians, Conflict with siblings, Other: bullying,
	32	0.0.0.Q33	Thanks for this background information. If there's anything else you think is important for us to know about you, you can write it in below.	Brother's addicted to gambling and it affects everyone else in the home. Brother have stolen from parents; problems focusing; parents are hard on her regarding school, stress
Depressive Disorders	95	1.1.1.Q1	Now I'd like to ask you some questions about your mood. In the past two weeks, how often have you felt sad, down, or depressed, with the down feeling lasting most of the day?	Nearly every day
	97	1.1.2.Q1	In the past two weeks, how often have you felt annoyed, irritable, or cranky, with the cranky feeling lasting most of the day?	Nearly every day
	99	1.1.3.Q1	In the past 2 weeks, how often have you felt bored, or like	Rarely

		nothing was fun, for most of the day?	
100	1.1.3.Q2a	Was there ever a time in the past that you felt bored, like nothing was fun for most of the day, nearly every day, for two weeks or longer?	Yes
104	1.1.3.Q3d	You said that in the past two weeks for most of the day you felt sad and irritable. When did this begin?	Month:March / Year:2021
110	1.1.3.Q4c	You said that in the past there was a time that lasted at least two weeks when for most of the day you felt bored, like nothing was fun. When was that? If you felt that way more than once, let me know when it was the worst.	Month:March / Year:2021
115	1.1.3.q5	How long did it last back then?	weeks:0 / months:6
581	2.1.5.q1	In the past 2 weeks, how often have you been sleeping two or more hours a day more than usual, either napping during the day or sleeping more hours at night?	Several days
582	2.1.5.q2	In the past when you were feeling sad, irritable and bored, were you often sleeping two or more hours a day more than usual, either napping during the day or sleeping more hours at night?	Yes
583	2.1.6.q1	In the past two weeks, how often have you felt tired, like you just didn't have enough energy to do the things you normally do?	Several days
584	2.1.6.q2	In the past when you were feeling sad, irritable and bored,	Yes

		did you often feel tired, like you just didn't have enough energy to do the things you normally do?	
585	2.1.7.q1	In the past two weeks, how often have you found it hard to concentrate?	More than half the days
588	2.1.8.q1	In the past two weeks, how often have you had trouble making up your mind about everyday decisions like what to wear, eat, or do?	More than half the days
590	2.1.9.q1	In the past two weeks, how often have you found yourself less hungry than usual?	Several days
591	2.1.9.q2	In the past when you were feeling sad, irritable and bored, did you often find yourself less hungry than usual?	Yes
592	2.1.10.q1	Since your mood has changed, have you lost any weight?	No
593	2.1.10.q2	In the past when you were feeling sad, irritable and bored, did you lose some weight?	No
594	2.1.11.q1	In the past two weeks, have you been especially hungry, craving sweets, or eating more than usual?	More than half the days
596	2.1.12.q1	Since you have been sad, irritable and bored, have you gained any weight?	No
597	2.1.12.q2	In the past when you were feeling sad, irritable and bored, did you gain some weight?	No
598	2.1.13.q1	In the past two weeks, how often have you felt agitated, like it was hard to sit without bouncing your leg or getting up and moving around?	Rarely

600	2.1.13.q3	In the past when you were sad, irritable and bored, did you often feel agitated and was it hard for you to sit without bouncing your leg or getting up and moving around?	No
602	2.1.14.q1	In the past two weeks, how often have you felt slowed down, like you were talking or walking in slow motion?	More than half the days
604	2.1.15.q1	In the past two weeks, how often have you felt guilty about something you said, did, or thought?	More than half the days
606	2.1.16.q1	In the past two weeks, how often have you felt hopeless?	More than half the days
607	2.1.17.q1	In the past two weeks, how often have you felt bad about yourself, like you were not as good as other kids, or that there were a lot of things you didn't like about yourself?	More than half the days
610	2.1.18.q1a	With friends	Yes
611	2.1.18.q1b	With your family	Yes
612	2.1.18.q1c	At school	No
613	2.1.18.q1d	At work	Yes
614	2.1.18.q1e	In after school activities	No
615	2.1.18.q1f	In other places or times	No

609	2.1.18.q1	Have the things we have just been talking about (i.e.,feeling sad, feeling irritable, feeling like nothing is fun, troubles sleeping, sleeping too much, feeling tired, troubles concentrating, difficulty making decisions, decreased appetite, increased appetite, feeling slowed down, feeling guilty, feeling hopeless, feeling bad about yourself and thoughts of death) caused problems for you in any of the following areas:	
1806	2.1.19.Q1a	Feeling sad	No
1807	2.1.19.Q1b	Feeling irritable	Yes
1808	2.1.19.Q1c	Feeling like nothing is fun	No
1809	2.1.19.Q1d	Troubles sleeping	No
1810	2.1.19.Q1e	Sleeping too much	Yes
1811	2.1.19.Q1f	Feeling tired	Yes
1812	2.1.19.Q1g	Troubles concentrating	No
1813	2.1.19.Q1h	Difficulty making decisions	Yes
1814	2.1.19.Q1i	Decreased appetite	Yes

	1816	2.1.19.Q1k	Increased appetite	Yes
	1819	2.1.19.Q1n	Feeling slowed down	No
	1820	2.1.19.Q1o	Feeling guilty	No
	1821	2.1.19.Q1p	Feeling hopeless	No
	1822	2.1.19.Q1q	Feeling bad about yourself	No
	1823	2.1.19.Q1r	Thoughts of death	No
	1805	2.1.19.Q1	You reported the following problems. Have these or were these present for a year or longer?	
	617	2.1.20.q1	Since you first experienced any of these symptoms, have you had any periods of two months or longer symptom free?	No
Bipolar Disorders	116	1.2.1.Q1	In the past two weeks, how often, without using drugs, did you feel like you were high or super happy for no particular reason, with the over the top good feeling lasting four or more hours?	Not at all
	117	1.2.1.Q2a	Was there ever a time in the past that you felt like you were high or super happy for no particular reason, for multiple hours a day for several days in a row?	No
	118	1.2.2.Q1	In the past two weeks, how often have you lost your temper	Nearly every day

			and done any of the following things: yelled at someone, thrown or broken something, or hit, pushed or kicked someone?	
	119	1.2.2.Q2	Have you always, or almost always, been someone who loses your temper a lot?	No
	121	1.2.4.Q1	In the past two weeks, how often have you needed less sleep than usual, and still felt rested and energized, sleeping at least three hours less than usual?	Several days
	122	1.2.4.Q2a	Was there ever a time in the past that you needed less sleep for several days in a row, and felt rested sleeping at least three hours less than usual?	Yes
	128	1.2.5.Q3k	You said that you have had a time when you lost your temper and exploded a lot and needed a lot less sleep than usual. When did this begin?	Month:December / Year:2017
	618	2.2.0.q1	You said that you experienced the following symptoms: super cranky and needing less sleep than usual. Have these things only been true for you at times when you were drinking or using drugs?	Yes
Psychosis	130	1.4.1.Q1	In the past two weeks, how often, during the daytime, as you were going about your regular activities, did you hear things that others could not hear? (ask for example to check if description is true hallucination; if not, mark 'not at all')	Several days
	134	1.4.2.Q1	In the past two weeks, how often have you felt that people you did not know were out to	More than half the days

		get you, were following you, or spying on you?	
135	1.4.2.Q1b	Was this limited to someone who is bullying you at school or in your neighborhood?	No
137	1.4.2.Q3	You said you had a time when the things listed below were true for you. When did this begin? During the daytime, as you were going about your regular activities, you heard things that others could not hear, You felt that people you did not know where out to get you and were following your or spying on you	Month:August / Year:2013
1345	2.4.3.Q1AA	Hear voices that told you to do something?	Present,Past,
1346	2.4.3.Q1AB	Hear voices commenting about what you were doing or thinking?	none,none,
1347	2.4.3.Q1AC	Hear two or more people talking when no one was there?	Present,none,
1348	2.4.3.Q1AD	Hear your thoughts spoken aloud?	Present,none,
1349	2.4.3.Q1AE	Hear voices that no one else could hear?	Present,none,
1833	2.4.3.Q1af	Had other odd experiences involving noises or voices (specify)?	,
1344	2.4.3.Q1A	When we were talking before you said there have recently been times that your mind played tricks on you, and you heard, saw, or smelled things that weren't really there. I am going to ask you about a	

		number of different types of experiences kids sometimes have, and I want you to tell me if it happened to you in the past two weeks or at any other time in the past.	
1356	2.4.4.Q1	When you've heard voices or noises that other people could not hear, did the noises or voices come from outside your head, like my voice now talking to you?	No
1358	2.4.5.Q1a	See something that wasn't there, that no one else could see?	Present,none,
1359	2.4.5.Q1b	Feel something on your skin when there wasn't anything there?	Present,none,
1360	2.4.5.Q1c	Smell something that no one else could smell?	Present,none,
1361	2.4.5.Q1d	Have other odd perceptual experiences (specify)?	QPresent:2,
1357	2.4.5.Q1	Listed below are some other types of experiences kids sometimes have. Mark if they happened to you in the past two weeks or any other time in the past.	
1362	2.4.6.Q1	How often in a typical week are you having trouble with any of the symptoms listed below: hear voices that told you to do something, hear two or more people talking when no one was there, hear your thoughts spoken aloud, hear voices that no one else could hear, see something that wasn't there, that no one else could see, feel something on your skin when there wasn't anything there,	Several days

		smell something that no one else could smell and 2?	
1366	2.4.6.Q2	In the past when your mind was playing tricks on you, when it was at its worse, how often in a typical week did you hear voices that told you to do something?	Several days
1377	2.4.11.Q1A	Believe god had chosen you to do something special for him?	Present,Past,
1378	2.4.11.Q1B	Believe your thoughts could be broadcast out loud so other people could know what you are thinking?	none,Past,
1379	2.4.11.Q1C	Believe people could take thoughts out of your mind against your will?	Present,none,
1380	2.4.11.Q1D	Believe people could put thoughts in your head that are not your own?	Present,Past,
1381	2.4.11.Q1E	Believe the TV or radio was sending you messages?	Present,none,
1382	2.4.11.Q1F	Believe someone was controlling your mind or body like a robot	none,none,
1855	2.4.11.Q1g	Believe something was seriously wrong with your body, like it was rotting from the inside	Present,none,
1856	2.4.11.Q1h	Were convinced that the world was about to come to an end	Present,none,
1857	2.4.11.Q1i	Had other thoughts that were odd and that other people didn't think were true (fill in )	QPresent:2,
1376	2.4.11.Q1	Below is a list of different ideas kids sometimes have. Check below all the ones you currently	

		think are true or thought were true in the past.	
1383	2.4.12.Q1	If someone tried to convince you that these thoughts listed below aren't really true, could they?  Someone was out to get you, was following you, or spying on you Believe god had chosen you to do something special for him Believe people could take thoughts out of your mind against your will Believe people could put thoughts in your head that are not your own Believe the tv or radio was sending you messages Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	No No
1384	2.4.21.Q1	In the past two weeks, how often have you thought any of the things listed below?  Someone was out to get you, was following you, or spying on you Believe god had chosen you to do something special for him Believe people could take thoughts out of your mind against your will Believe people could put thoughts in your head that are not your own Believe the tv or radio was sending you messages Believe something was seriously wrong with your body,	Several days

		like it was rotting from the inside  Were convinced that the world was about to come to an end  2	
1386	2.4.12.Q2	In the past, if someone tried to convince you that it really isn't true that  Believe god had chosen you to do something special for him Believe your thoughts could be broadcast out loud so other people could know what you are thinking Believe people could put thoughts in your head that are not your own, could they convince you it wasn't true?	No
1387	2.4.21.Q2	In the past when you had the thoughts listed below how often did you have them in a typical week?  Believe god had chosen you to do something special for him Believe your thoughts could be broadcast out loud so other people could know what you are thinking Believe people could put thoughts in your head that are not your own	Several days
1836	2.4.20.Q1a	Hear voices that told them to do something?	No
1838	2.4.20.Q1c	Hear two or more people talking when no one was there?	Yes
1839	2.4.20.Q1d	Hear their thoughts spoken aloud?	Yes

1840	2.4.20.Q1e	Hear voices that no one else could hear?	Yes
1842	2.4.20.Q1g	See something that wasn't there, that no one else could see?	No
1843	2.4.20.Q1h	Feel something on their skin when there wasn't anything there?	No
1844	2.4.20.Q1i	Smell something that no one else could smell?	Yes
1845	2.4.20.Q1j	2	No
1846	2.4.20.Q1k	Believe god had chosen them to do something special for him?	Yes
1847	2.4.20.Q1I	Believe their thoughts could be broadcast out loud so other people could know what they are thinking?	Yes
1848	2.4.20.Q1m	Believe people could take thoughts out of their mind against their will?	Yes
1849	2.4.20.Q1n	Believe people could put thoughts in their head that were not their own?	No
1850	2.4.20.Q1o	Believe the TV or radio was sending them messages?	No
1852	2.4.20.Q1q	Believe something was seriously wrong with their body, like it was rotting from the inside	No
1853	2.4.20.Q1r	Were convinced that the world was about to come to an end	Yes
1854	2.4.20.Q1s	2	No

1884	2.4.20.Q1t	Felt people they didn't know were spying on them	Yes
1835	2.4.20.Q1	Does anyone else in your family or any members of your church also have any of the experiences listed below?	
1371	2.4.10.Q3A	With friends	No
1372	2.4.10.Q3B	With family	No
1373	2.4.10.Q3C	At school	No
1374	2.4.10.Q3D	At work	No
1375	2.4.10.Q3E	With any other activities	No
1370	2.4.10.Q3	Have the symptoms we have just been talking about caused difficulties for you in any of the following areas	
1388	2.4.14.Q3	Have the symptoms we have just been talking about only happen when you were drinking a lot or using drugs?  Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't	No

		there, that no one else could see     Feel something on your skin when there wasn't anything there     Smell something that no one else could smell?     2     Believe god had chosen you to do something special for him?     Believe your thoughts could be broadcast out loud so other people could know what you are thinking?     Believe people could take thoughts out of your mind against your will?     Believe people could put thoughts in your head that are not your own?     Believe the TV or radio was sending you messages?     Believe something was seriously wrong with your body, like it was rotting from the inside     Were convinced that the world was about to come to an end     2		
1385	2.4.13.Q3	Have you only had the symptoms we have just been talking about when you are feeling super sad, cranky, or more energized than usual?  Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your	Yes	

		skin when there wasn't anything there  Smell something that no one else could smell?  Believe god had chosen you to do something special for him?  Believe your thoughts could be broadcast out loud so other people could know what you are thinking?  Believe people could take thoughts out of your mind against your will?  Believe people could put thoughts in your head that are not your own?  Believe the TV or radio was sending you messages?  Believe something was seriously wrong with your body, like it was rotting from the inside  Were convinced that the world was about to come to an end		
1364	2.4.19.Q3	For how long have you been having the symptoms we have just been talking about? Please enter days, weeks or months.  Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your skin when there wasn't anything there Smell something that no one else could smell?	days:4 / weeks:0 / months:0	

		Believe god had chosen you to do something special for him? Believe your thoughts could be broadcast out loud so other people could know what you are thinking? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end		
1397	2.4.17.Q1	You said you also had symptoms like this in the past. Did you ever have a three month period or longer without any of these symptoms?  Hear voices that told you to do something Believe god had chosen you to do something special for him? Believe your thoughts could be broadcast out loud so other people could know what you are thinking? Believe people could put thoughts in your head that are not your own?	No No	
1399	2.4.22.Q1	You also reported that you have had a time when you were feeling super sad, cranky, or more energized than usual. Did the symptoms listed below ever	Yes	

			overlap with that time?     Hear voices that told you to do something     Believe god had chosen you to do something special for him?     Believe your thoughts could be broadcast out loud so other people could know what you are thinking?     Believe people could put thoughts in your head that are not your own?	
Panic Disorder	141	1.5.1.Q1	In the past two weeks, have you had any panic attacks where for no reason at all you suddenly felt super scared and like you were having a heart attack?	Rarely
	142	1.5.1.Q2	When did this begin?	Month:January / Year:2019
	1401	2.5.2.Q1a	Shortness of breath	Yes
	1402	2.5.2.Q1b	Dizziness	Yes
	1403	2.5.2.Q1c	Heart palpitations	No
	1404	2.5.2.Q1d	Shaking	No
	1405	2.5.2.Q1e	Sweating	Yes
	1406	2.5.2.Q1f	Choking	No
	1407	2.5.2.Q1g	Nausea	Yes

1408	2.5.2.Q1h	Feeling that things aren't real	No
1409	2.5.2.Q1i	Numbness	No
1410	2.5.2.Q1j	Heat or chills	No
1411	2.5.2.Q1k	Chest pain	No
1412	2.5.2.Q1I	Fear of dying	No
1413	2.5.2.Q1m	Fear of losing control	No
1400	2.5.2.Q1	Before you said you sometimes have panic attacks, where for no reason you suddenly feel super scared, like you are having a heart attack. When you have panic attacks, do you experience any of the following? Check all that apply.	
1414	2.5.3.Q1	Over the past 2 weeks, how often have you worried about having another attack, or about something bad happening because of the attacks?	Several days
1415	2.5.4.Q1	In the past two weeks, how often have you not gone out, gone out less often, or done anything else differently because of the attacks?	Not at all
1433	2.5.4.Q2	After your first attack, or after your first few attacks, did you stop going out or go out less often, or do anything else	Yes

			differently because of them?	
	1416	2.5.5.Q1	You mentioned you worried about the attacks and did things differently because of the attacks. Was this true for one month or longer?	Yes
	1417	2.5.6.Q1	Were the attacks related to drug use?	No
	1892	2.5.9.Q1	Did these symptoms start shortly after a significant life event or stressor?	Yes
	1893	2.5.9.Q2	Describe what happened in the space below if you are comfortable doing so. If not, just press continue.	
Agoraphobia	146	1.6.1.Q1A	Buses	Rarely
	147	1.6.1.Q1B	Trains	Rarely
	148	1.6.1.Q1C	Subways	Not at all
	149	1.6.1.Q1D	Open Spaces	Not at all
	150	1.6.1.Q1E	Bridges	Not at all
	151	1.6.1.Q1F	Shops	Not at all
	152	1.6.1.Q1G	Theatres	Not at all
	153	1.6.1.Q1H	Malls	Not at all

	154	1.6.1.Q1I	Crowds	Not at all
	155	1.6.1.Q1J	Standing in lines	Not at all
	156	1.6.1.Q1K	Being out of the house alone	Not at all
	145	1.6.1.Q1	In the past two weeks, how often have you avoided any of the following places because they make you super anxious?  Mark all that apply.	
	158	1.6.1.Q3a	Was there ever a time that for several months you avoided two or more of these situations because they made you super anxious: leaving the house, riding in cars or buses, being in enclosed places like theatres or crowds, or being in open spaces like parking lots or on bridges?	No
Separation Anxiety	160	1.7.1.Q1	In the past two weeks, how often have you felt super upset when your mom, dad, or another caregiver left the house or dropped you off somewhere?	Several days
	162	1.7.2.Q1	In the past two weeks, how often have you tried to stay home or actually stayed home from school because you wanted to be with your mom, dad, or another caregiver?	Several days
	166	1.7.3.Q3c	You said that you have had a time when you felt super upset when you were separated from your mom, dad, or caregiver and did not want to go to school because of this. When did this begin?	Month:January / Year:2021

1466	2.7.3.Q1	In the past two weeks, how often have you worried about being kidnapped or having something else bad happen to you that would separate you from your parents?	Several days
1481	2.7.3.Q2	Was there ever a time you worried about being kidnapped or having something else bad happen to you that would separate you from your parents?	Yes
1467	2.7.4.Q1	In the past two weeks, how often have you worried that your mom or dad might get hurt or something else bad might happen to them?	Nearly every day
1468	2.7.5.Q1	In the past two weeks, how often have you felt afraid to be by yourself in a different part of the house than your mom or dad?	More than half the days
1469	2.7.6.Q1	In the past two weeks, how often have you needed your mom or dad nearby to fall asleep at night?	Several days
1484	2.7.6.Q2	Was there ever a time that you needed your mom or dad nearby to fall asleep at night?	Yes
1470	2.7.7.Q1	In the past two weeks, how often have you had a nightmare about something bad happening to one of your parents or about being separated from your parents?	More than half the days
1471	2.7.8.Q1	In the past two weeks, how often have you had headaches or stomachaches when separated from your mom or dad?	Several days
1486	2.7.8.Q2	Did you ever have a lot of headaches or stomachaches	Yes

			when separated from your mom or dad?	
	1473	2.7.9.Q1A	With friends	Yes
	1474	2.7.9.Q1B	With your family	Yes
	1475	2.7.9.Q1C	At school	Yes
	1476	2.7.9.Q1D	At work	No
	1477	2.7.9.Q1E	In after school activities	Yes
	1478	2.7.9.Q1F	In other places or times	No
	1472	2.7.9.Q1	Did your fear of being separated from your parent ever cause problems for you in any of the following areas:	
	1479	2.7.10.Q1	How much discomfort or distress did your fear of being separated from your parent cause you?	8
	1896	2.7.12.Q1	Did these symptoms start shortly after a significant life event or stressor?	No
Social Anxiety Disorder	167	1.8.1.Q1	In the past two weeks, how often have you felt super shy and really uncomfortable in different social situations?	Several days
	169	1.8.1.Q3a	Was there ever a time, for a month or longer, that you felt super shy and really uncomfortable in different social situations?	No
Specific Phobia	176	1.9.1.Q1a	The dark	Yes
	177	1.9.1.Q1b	Spiders	Yes

178	1.9.1.Q1c	Heights	No
179	1.9.1.Q1d	Animals	No
180	1.9.1.Q1e	Elevators	No
181	1.9.1.Q1f	Bridges	No
182	1.9.1.Q1g	Flying	No
183	1.9.1.Q1h	Seeing blood	No
184	1.9.1.Q1i	Receiving an injection	No
185	1.9.1.Q1J	Other (if Yes specify)	
175	1.9.1.Q1	Mark below the things you currently or in the past felt deathly afraid of and that always or almost always made you super anxious:	
186	1.9.2.Q1	Over the past two weeks, how often have you avoided or tried to avoid the dark or spiders?	Rarely
196	1.9.2.Q2	Was there ever a time you avoided or tried to avoid these things the dark or spiders, or if you couldn't avoid it, endured it with great distress?	Yes

	188	1.9.3.Q1a	With friends	Yes
	189	1.9.3.Q1b	With family	Yes
	190	1.9.3.Q1c	At school	Yes
	191	1.9.3.Q1d	At work	Yes
	192	1.9.3.Q1e	In after school activities	No
	193	1.9.3.Q1f	In other places or times	No
	187	1.9.3.Q1	Has your fear of these things caused problems for you in any of the following areas:	
	194	1.9.4.q1	How much discomfort or distress has your fear of these things caused you?	7
	195	1.9.5.q1	When did your fear of these things begin?	Month:March / Year:2020
	197	1.9.5.Q2	When was the last time you felt deathly afraid of any of these things?	Month:March / Year:2021
Generalized Anxiety Disorder	198	1.10.1.Q1	In the past two weeks, how often have you worried a super lot about a lot of different things?	Several days
	200	1.10.1.Q3a	Was there ever a time, for a month or longer, that you worried a super lot about a lot of different things?	Yes
	201	1.10.1.Q4	When was that?	Month:January / Year:2022
	1598	2.10.2.Q2A	How I look	Yes
	1599	2.10.2.Q2B	What I said	Yes

1600	2.10.2.Q2C	How I did on a test	Yes
1601	2.10.2.Q2D	If people like me	Yes
1602	2.10.2.Q2E	The future	Yes
1603	2.10.2.Q2F	The past	Yes
1604	2.10.2.Q2G	Other (specify)	
1597	2.10.2.Q2	You said back in January 2022 you worried a lot. What kinds of things did you worry about back then? Mark as many as apply.	
1606	2.10.3.Q2A	I felt restless	Yes
1607	2.10.3.Q2B	I felt keyed up	Yes
1608	2.10.3.Q2C	I felt easily tired	Yes
1609	2.10.3.Q2D	I had difficulty concentrating	Yes
1610	2.10.3.Q2E	My mind went blank	Yes
1611	2.10.3.Q2F	I felt irritable	Yes
1612	2.10.3.Q2G	I had muscle tension	Yes
1613	2.10.3.Q2H	I had difficulty falling asleep	Yes
1614	2.10.3.Q2l	I had difficulty staying asleep	Yes
1605	2.10.3.Q2	In addition to having problems with worrying, did you have any of these other symptoms back	

			then? Mark all that apply.		
	1615	2.10.4.Q2	Back then, did you feel like you had trouble controlling your worries?	Yes	
	1617	2.10.5.Q2A	With friends	Yes	
	1618	2.10.5.Q2B	With your family	Yes	
	1619	2.10.5.Q2C	At school	Yes	
	1620	2.10.5.Q2D	At work	No	
	1621	2.10.5.Q2E	In after school activities	Yes	
	1622	2.10.5.Q2F	In other places or times	Yes	
	1616	2.10.5.Q2	Did your worrying a lot cause problems for you in any of the following areas:		
	1623	2.10.6.Q2	How much discomfort or distress did your worrying cause you back then?	9	
	1624	2.10.7.Q1	When did your problems with excessive worries stop?	Month:September / Year:2022	they haven't stopped
Obsessive Compulsive Disorder	203	1.11.1.Q1A	Thoughts or images about harming others or doing something horrible when you didn't want to	Past 2 weeks~Yes,Ever~Yes,	
	204	1.11.1.Q1C	Meaningless words, numbers, or images that intrude into your mind that you can't get rid of	Past 2 weeks~Yes,Ever~Yes,	
	205	1.11.1.Q1D	Religious thoughts that are disrespectful or offensive	Past 2 weeks~No,Ever~Yes,	
	206	1.11.1.Q1E	Thoughts that things had to be lined up exactly right or done a special way	Past 2 weeks~No,Ever~No,	

207	1.11.1.Q1F	Worries about throwing seemingly unimportant things away	Past 2 weeks~No,Ever~No,
208	1.11.1.Q1G	Thoughts about dirt, germs or contamination	Past 2 weeks~No,Ever~No,
209	1.11.1.Q1H	Other recurring unwelcome senseless distressing thoughts (specify)	,
202	1.11.1.Q1	Have you ever had any of the following unwelcome, senseless, distressing thoughts come into your mind over and over again, even though you didn't want to have them? Mark all that apply. DO NOT RATE THOUGHTS ABOUT GERMS OR OTHER UNWELCOME SENSELESS THOUGHTS AS TRUE IF THESE THOUGHTS ONLY OCCURRED IN RELATION TO THE COVID-19 PANDEMIC.	
1858	1.11.1.Q11a	On how many days the past two weeks have you had these thoughts?	More than half the days
210	1.11.1.Q2	When did you begin having these thoughts?	Month:June / Year:2017
212	1.11.2.Q1A	Excessive or ritualized cleaning of household or other items	Past 2 weeks~No,Ever~No,
213	1.11.2.Q1B	Excessive hand washing	Past 2 weeks~No,Ever~No,
214	1.11.2.Q1C	Excessive or ritualized showering, bathing, tooth brushing, or toilet routine	Past 2 weeks~No,Ever~No,
215	1.11.2.Q1D	Ordering or arranging things a certain way	Past 2 weeks~No,Ever~No,
216	1.11.2.Q1F	Touching things a certain way	Past 2 weeks~No,Ever~No,
217	1.11.2.Q1G	Needing to count and recount	Past 2 weeks~No,Ever~No,

218	1.11.2.Q1H	Moving in a certain way or repeating certain actions	Past 2 weeks~No,Ever~No,
219	1.11.2.Q1I	Mentally repeating certain words or numbers	Past 2 weeks~No,Ever~No,
220	1.11.2.Q1J	Other repetitive behaviors that interfere with your life (specify)	,
211	1.11.2.Q1	Have you ever found yourself having to do over and over again any of the things listed below? Mark all that apply.  DO NOT RATE THE  BEHAVIORS OF CLEANING  OR HAND WASHING AS TRUE  IF THESE BEHAVIORS ONLY  OCCURRED IN RELATION TO  THE COVID-19 PANDEMIC.	
1625	2.11.3.Q1	You said that you've had unwanted worrisome thoughts such as Thoughts or images about harming others or doing something horrible when you didn't want to, Meaningless words, numbers, or images that intrude into your mind that you can't get rid of and Religious thoughts that are disrespectful or offensive, past 2 weeks or ever. Have you wished you could stop yourself from having these thoughts?	No
1626	2.11.4.Q1	Have you tried to ignore the thoughts or do something to make them less stressful for you?	Yes
1627	2.11.5.Q1	About how much time have you spent each day thinking these thoughts?	Less than 1 hr
1629	2.11.6.Q1A	With friends	No
1630	2.11.6.Q1B	With your family	No

	1631	2.11.6.Q1C	At school	No
	1632	2.11.6.Q1D	At work	No
	1633	2.11.6.Q1E	In after school activities	No
	1634	2.11.6.Q1F	In other places or times	No
	1628	2.11.6.Q1	Have these thoughts caused problems for you in any of the following areas:	
	1635	2.11.7.Q1	How much discomfort or distress have these thoughts caused you?	6
	1656	2.11.7.Q2	When was the last time you had these thoughts?	Month:January / Year:2022
Enuresis and Encopresis	222	1.12.1.Q1	In the past two weeks, how many times at night or during the day have you wet yourself?	Not at all
	232	1.12.1.Q2a	Was there ever a time, for a month or longer, that you had a lot of accidents and wet yourself either in the day or nighttime?	No
	245	1.12.5.Q1	In the past two weeks, how many times at night or during the day have you soiled yourself and had a bowel movement in your pants?	Not at all
	248	1.12.5.Q2a	Was there ever a time, for a month or longer, that you had a lot of accidents and soiled yourself either in the day or nighttime?	No

Eating Disorders	254	1.13.1.Q1	These next set of questions are about your eating habits and your feelings about your shape and weight. In the past two weeks, how often have you been preoccupied with your weight or worrying a lot about being fat?	Not at all
	257	1.13.1.Q2a	Was there ever a time, that you worried all the time about your weight or becoming fat?	No
	255	1.13.2.Q1	What is your current height and weight (please make your best guess)?	feet:5 / inches:0 / weight:127
	1994	1.13.2.Q1b	Was there ever a time that you weighed a lot less than usual or a lot less than others thought you should?	No
	259	1.13.3.Q1	In the past two weeks, how many days have you made yourself throw up to try to control your weight or because you were upset that you ate too much?	Not at all
	260	1.13.3.Q2a	Was there ever a time, that you made yourself throw up once a week or more?	No
	261	1.13.4.Q1	In the past two weeks, how many days did you do other things to control your weight, like exercise excessively, restrict what you ate, take laxatives, or diet pills?	Not at all
	262	1.13.4.Q2a	Was there ever a time, for a month or longer, that you often did any of these things to control your weight?	No
	263	1.13.5.Q1	In the past two weeks, how often have you had eating binges, when you lost control of your eating and ate way more than you needed,	Not at all

			because you were unable to stop yourself from eating?	
	264	1.13.5.Q2a	Was there ever a time, for a month or longer, that you would go on eating binges at least once a week?	No
Attention Deficit Hyperactivity Disorder	280	1.14.1.Q1	In the past two weeks, how often have you had trouble paying attention and keeping focused when you're working on your homework or other things that require concentration?	Not at all
	282	1.14.1.Q3a	Was there ever a time that you had a lot of trouble keeping focused and paying attention?	No
	284	1.14.2.Q1	In the past two weeks, how often have little distractions, like someone talking or the telephone ringing, made it hard for you to keep your mind on what you were working on?	Not at all
	286	1.14.2.Q3a	Was there ever a time when you were often easily distracted?	No
	288	1.14.3.Q1	In the past two weeks, how often have you had trouble staying in your seat at school or at home when you were expected to stay seated?	Not at all
	290	1.14.3.Q3a	Was there ever a time that you often had trouble staying seated?	No
	292	1.14.4.Q1	In the past two weeks, how often have you gotten in trouble, or done something you could have gotten in trouble for because you were impulsive and acted before you thought?	Not at all
	294	1.14.4.Q3a	Was there ever a time that you were impulsive and often acted	No

			before you thought?	
Oppositional Defiant Disorder	311	1.15.2.Q1	In the past two weeks, how often did you talk back to or argue with your parents or teachers?	Not at all
	312	1.15.2.Q2a	Was there ever a time that you argued a lot with your parents or teachers?	No
	313	1.15.3.Q1	In the past two weeks, how often did you refuse to do something a grown up asked you to do?	Not at all
	314	1.15.3.Q2a	Was there ever a time that you often refused to do the things grownups asked?	No
Conduct Disorder	319	1.16.1.Q2a	Was there ever a time that you often told lies, not just to get out of trouble, but to try to con someone?	No
	321	1.16.2.Q2a	Was there ever a time that you cut school without the permission of your parents?	No
	325	1.16.3.Q3a	Was there ever a time that you often got into a lot of physical fights with someone other than your brothers and/or sisters?	No
	328	1.16.4.Q2a	Was there ever a time that you often made fun of, threatened, or bullied people?	No
	330	1.16.5.Q2a	Was there ever a time that you stole something worth at least \$20?	No
Tic Disorders	362	1.17.1.Q1	In the past two weeks, how often did you have tics like uncontrollable eye blinking, shoulder shrugging, head tilting, or other parts of your body moving unexpectedly when you did not want them to?	Not at all

	363	1.17.1.Q2a	Was there ever a time that you	No
			often had unexpected tics or body movements?	
	364	1.17.2.Q1	In the past two weeks, how often did you repeatedly make sounds or say words that you couldn't control?	Not at all
	365	1.17.2.Q2a	Was there ever a time that you repeatedly made sounds or said words that you couldn't control?	No
Autism Spectrum Disorders	369	1.18.1.Q1	In the past two weeks, how often did your child do unusual body movements like hand flapping, head weaving, body rocking, or body spinning?	Not at all
	370	1.18.1.Q2	Was there ever a time that your child frequently did these sorts of unusual body movements?	No
	371	1.18.2.Q1	In the past two weeks, how often have you worked real hard to keep routines and activities the same so your child would not get upset?	Not at all
	372	1.18.2.Q2	Was there ever a time that your child was frequently easily upset by changes in routines or activities, and you had to work real hard to keep things the same?	No
	373	1.18.3.Q1	In the past two weeks, how often has your child had trouble maintaining eye contact and looking at you or other people when they are talking with your child?	Not at all
	374	1.18.3.Q2	Was there ever a time that your child had trouble maintaining eye contact when talking with others?	No
Alcohol Use	389	1.19.1.Q1	What are your favorite alcoholic	Don't drink alcohol,

Disorder			beverages to drink? Check all that apply.	
	392	1.19.3.Q2	Was there ever a time in the past when you had three or more alcoholic drinks on a given day?	No
	394	1.19.5.Q2a	Was there ever a time that drinking caused you any problems with your parents, friends, or people at school or at work?	No
	1774	1.19.6.Q2b	Was there ever a time when you drank on 6 or more occasions in a 12 month period?	No
Drug Use Disorders	402	1.20.1.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
	403	1.20.1.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Yes
	404	1.20.1.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Yes
	405	1.20.1.Q1D	Cocaine (coke, crack)	Yes
	406	1.20.1.Q1E	Opioids (heroin, OxyContin morphine, codeine, methadone, Demerol, Percodan)	Yes
	407	1.20.1.Q1F	Other Hallucinogens (LSD, mescaline, peyote, DMT, salvia, psilocybin, magic mushrooms, ecstasy/molly/MDMA, morning	Yes

		glory seeds)	
408	1.20.1.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Yes
409	1.20.1.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Yes
410	1.20.1.Q1I	Other Drugs (fill in) (e.g., steroids, etc).	
1912	1.20.1.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Yes
401	1.20.1.Q1	Check below the drugs any of your friends use:	
412	1.20.2.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
413	1.20.2.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Yes
414	1.20.2.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Yes
415	1.20.2.Q1D	Cocaine (coke, crack)	Yes
416	1.20.2.Q1E	Opioids (heroin, OxyContin morphine, codeine, methadone, Demerol, Percodan)	No
417	1.20.2.Q1F	Other Hallucinogens (LSD,	No

		mescaline, peyote, DMT, salvia, psilocybin, magic mushrooms, ecstasy/molly/MDMA, morning glory seeds)	
418	1.20.2.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
419	1.20.2.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Yes
420	1.20.2.Q1I	Other Drugs (fill in) (e.g., steroids, etc).	
1913	1.20.2.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Yes
411	1.20.2.Q1	Check below the drugs you have tried one or more times:	
423	1.20.3.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Nearly every day
424	1.20.3.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Nearly every day
425	1.20.3.Q1D	Cocaine (coke, crack)	Nearly every day
429	1.20.3.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Nearly every day
1914	1.20.3.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Nearly every day

421	1.20.3.Q1	In the past two weeks, how often did you use the following drugs? (don't count drugs taken as prescribed by your doctor)	
433	1.20.3.Q2B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Yes
434	1.20.3.Q2C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Yes
435	1.20.3.Q2D	Cocaine (coke, crack)	Yes
439	1.20.3.Q2H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Yes
1915	1.20.3.Q2J	PCP (angel dust), ketamine, cough medicine or DXM	Yes
431	1.20.3.Q2	Have you used any of the following drugs more than five times? Again, don't include drugs taken as prescribed by a doctor.	
443	1.20.4.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Nearly every day
444	1.20.4.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Nearly every day

445	1.20.4.Q1D	Cocaine (coke, crack)	Nearly every day
449	1.20.4.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Nearly every day
1916	1.20.4.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Nearly every day
441	1.20.4.Q1	In the past two weeks, how often did you wake up feeling sick (nausea, headache, tired, anxious, sad, dizzy, a lot of sweating, stomach ache) or missed school or work because of using the drug or drugs listed below the night before?	
463	1.20.5.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Nearly every day
464	1.20.5.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Nearly every day
465	1.20.5.Q1D	Cocaine (coke, crack)	Nearly every day
469	1.20.5.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Nearly every day
1918	1.20.5.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Nearly every day
461	1.20.5.Q1	In the past two weeks, how often has your use of the drug or drugs listed below led to arguments or problems with	

		your parents, friends, or people at school or at work?	
493	1.20.5.Q3bb	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Groggy- >Month:January / Year:2014-*- Arguments- >Month:January / Year:2020-*- UsedFiveTimes- >Month:November / Year:2019
494	1.20.5.Q3bc	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Groggy->Month:April / Year:2018-*- Arguments- >Month:March / Year:2020-*- UsedFiveTimes- >Month:May / Year:2018
495	1.20.5.Q3bd	Cocaine (coke, crack)	Groggy->Month:April / Year:2020-*- Arguments- >Month:March / Year:2021-*- UsedFiveTimes- >Month:January / Year:2020
499	1.20.5.Q3bh	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Groggy- >Month:January / Year:2019-*- Arguments- >Month:March / Year:2017-*- UsedFiveTimes- >Month:May / Year:2018
1921	1.20.5.Q3bJ	PCP (angel dust), ketamine, cough medicine or DXM	Groggy->Month:June / Year:2020-*- Arguments- >Month:February / Year:2020-*- UsedFiveTimes- >Month:June / Year:2018

491	1.20.5.Q3b	You said that you had a time when you had the following problems because of using the drug or drugs listed below. When did this begin?	Month:January / Year:2014
912	2.20.6.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Rarely
913	2.20.6.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Rarely
914	2.20.6.Q1D	Cocaine (coke, crack)	Rarely
918	2.20.6.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Rarely
1922	2.20.6.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Rarely
910	2.20.6.Q1	These next questions refer to your use of the drugs you mentioned earlier that you've tried. In the past two weeks, how often have you told yourself you'll only use a certain amount of the following drugs on a given occasion and found yourself using much more than you planned?	
941	2.20.7.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all

942	2.20.7.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all
943	2.20.7.Q1d	Cocaine (coke, crack)	Rarely
947	2.20.7.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1924	2.20.7.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all
939	2.20.7.Q1	In the last 2 weeks, how often have you gone to school or work after you had been using the following drugs or when you were hung over?	
951	2.20.7.Q2ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
952	2.20.7.Q2ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
957	2.20.7.Q2ah	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1925	2.20.7.Q2aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
949	2.20.7.Q2a	Was there ever a time that you	

		went to school or work after you had been using the following drugs or when you were hung over from using?		
970	2.20.8.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all	
971	2.20.8.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all	
972	2.20.8.Q1d	Cocaine (coke, crack)	Not at all	
976	2.20.8.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all	
1926	2.20.8.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all	
968	2.20.8.Q1	In the past two weeks, how often have you driven after using the following drugs?		marijuana - several days
999	2.20.8.Q3b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all	
1000	2.20.8.Q3c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all	
1001	2.20.8.Q3d	Cocaine (coke, crack)	Not at all	

	T	1	
1005	2.20.8.Q3h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1928	2.20.8.Q3J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all
997	2.20.8.Q3	In the past two weeks, how often have you done anything dangerous after using the following drugs?	
1010	2.20.8.Q5ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1011	2.20.8.Q5ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1012	2.20.8.Q5ad	Cocaine (coke, crack)	No
1016	2.20.8.Q5ah	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1929	2.20.8.Q5aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
1008	2.20.8.Q5a	Was there ever a time that you often did something dangerous after using the following drugs?	
1030	2.20.9.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed,	Not at all

		uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	
1031	2.20.9.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all
1032	2.20.9.Q1d	Cocaine (coke, crack)	Not at all
1036	2.20.9.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1930	2.20.9.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all
1028	2.20.9.Q1	In the past two weeks, how often have you thrown up or had an accident and hurt yourself after using the following drugs?	
1040	2.20.9.Q2ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1041	2.20.9.Q2ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1042	2.20.9.Q2ad	Cocaine (coke, crack)	No
1046	2.20.9.Q2ah	Solvents/Inhalants (liquids, sprays or gases that you sniff	No

		or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	
1931	2.20.9.Q2aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
1038	2.20.9.Q2a	Was there ever a time that you threw up or hurt yourself after using the following drugs?	
1059	2.20.10.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all
1060	2.20.10.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all
1061	2.20.10.Q1d	Cocaine (coke, crack)	Not at all
1065	2.20.10.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1932	2.20.10.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all
1057	2.20.10.Q1	In the past two weeks, how often has using the following drugs made your moods notably worse?	
1069	2.20.10.Q2ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No

1070	2.20.10.Q2ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1071	2.20.10.Q2ad	Cocaine (coke, crack)	No
1075	2.20.10.Q2ah	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1933	2.20.10.Q2aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
1067	2.20.10.Q2a	Was there ever a time your moods got notably worse after using the following drugs?	
1088	2.20.11.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all
1089	2.20.11.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all
1090	2.20.11.Q1d	Cocaine (coke, crack)	Not at all
1094	2.20.11.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1934	2.20.11.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all

1086	2.20.11.Q1	In the past two weeks, how often did you crave the following drugs?	
1098	2.20.11.Q2ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1099	2.20.11.Q2ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1100	2.20.11.Q2ad	Cocaine (coke, crack)	No
1104	2.20.11.Q2ah	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1935	2.20.11.Q2aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
1096	2.20.11.Q2a	Was there ever a time that you often craved the following drugs?	
1117	2.20.12.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all
1118	2.20.12.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	Not at all
1119	2.20.12.Q1d	Cocaine (coke, crack)	Not at all

1123	2.20.12.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	Not at all
1936	2.20.12.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	Not at all
1115	2.20.12.Q1	How often has the time using the following drugs taken the place of the time you used to spend doing your usual activities, like sports, hobbies, spending time with family or friends, or work or school?	
1127	2.20.12.Q2ab	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1128	2.20.12.Q2ac	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1129	2.20.12.Q2ad	Cocaine (coke, crack)	No
1133	2.20.12.Q2ah	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1937	2.20.12.Q2aJ	PCP (angel dust), ketamine, cough medicine or DXM	No
1125	2.20.12.Q2a	Was there ever a time when using the following drugs took the place of the time you used	

		to spend doing your usual activities?	
1146	2.20.13.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1147	2.20.13.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1148	2.20.13.Q1d	Cocaine (coke, crack)	No
1152	2.20.13.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1938	2.20.13.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
1144	2.20.13.Q1	Was there ever a time you that you often thought about wanting to cut back on your use of the following drugs?	
1156	2.20.14.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1157	2.20.14.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1158	2.20.14.Q1d	Cocaine (coke, crack)	No

		T.	T
1162	2.20.14.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1939	2.20.14.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
1154	2.20.14.Q1	Was there ever a time that you tried to quit using the following drugs but couldn't?	
1166	2.20.15.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1167	2.20.15.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1168	2.20.15.Q1d	Cocaine (coke, crack)	No
1172	2.20.15.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1940	2.20.15.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
1164	2.20.15.Q1	Was there ever a time that you had the shakes or other bad symptoms after you cut down on your use of the following drugs?	
1176	2.20.16.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed,	No

		uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	
1177	2.20.16.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1178	2.20.16.Q1d	Cocaine (coke, crack)	No
1182	2.20.16.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
1941	2.20.16.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
1174	2.20.16.Q1	Since you have been using the following drugs, have you found that you need to use a lot more to get the same high?	
1186	2.20.17.Q1b	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
1187	2.20.17.Q1c	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
1188	2.20.17.Q1d	Cocaine (coke, crack)	No
1192	2.20.17.Q1h	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue,	No

			gasoline, ether, paint, nitrous oxide, whippits, or poppers)	
	1942	2.20.17.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
	1184	2.20.17.Q1	Did you ever spend a great deal of time either using, trying to obtain, or hung over from the following drugs?	
Post- Traumatic Stress Disorder	502	1.21.1.Q1A	A car accident in which you or another person in the car was hurt bad enough to require medical attention	No
	503	1.21.1.Q1B	Significant accident or medical condition, including coronavirus, for which you needed specialized, intensive, or painful medical treatment	No
	504	1.21.1.Q1C	Witness or caught in a fire that caused significant property damage or personal injury	No
	505	1.21.1.Q1D	Witness or caught in a natural disaster that caused significant property damage or personal injury	No
	506	1.21.1.Q1E	Witness or victim of a school shooting or other act of terrorism	No
	507	1.21.1.Q1F	Witness death or mass destruction in a war zone	No
	508	1.21.1.Q1G	Witness someone shot or stabbed in the community	No
	509	1.21.1.Q1H	Shot, stabbed, or beat badly by a non-family member	No
	511	1.21.1.Q1J	Beaten to the point of having bruises or had a more serious injury caused by a grown-up in the home	No
	514	1.21.1.Q1M	Witness the grown-ups in the	No

			home push, shove or hit one another	
	517	1.21.1.Q1P	A peer forced you to do something sexually	No
	518	1.21.1.Q1Q	Learned about the life- threatening illness or sudden unexpected death of a loved one due to coronavirus, cancer, violence, or other cause	No
	1903	1.21.1.Q1T	Was robbed and assaulted or robbed and threatened physically	No
	1910	1.21.1.Q1v	Other	
	501	1.21.1.Q1	Please check off the things from the list below that have happened to you in your lifetime.	
Sleep Problems	552	1.22.1.Q1	In the past two weeks, how often did you have trouble falling asleep or staying asleep when you were tired and wanted to sleep?	More than half the days
	553	1.22.1.Q2	When did this begin?	Month:July / Year:2014
Suicidality	556	1.23.1.Q1	Sometimes when kids get upset or feel numb, they may do things to hurt themselves, like scratching, cutting, or burning themselves. In the past two weeks, how often have you done any of these things or other things to try to hurt yourself?	Several days
	558	1.23.1.Q2b	Was there ever another time in the past when you did things to hurt yourself on purpose, like cut, scratch or burn yourself?	Yes
	559	1.23.1.Q2c	When was that?	Month:July / Year:2014

560	1.23.2.Q1	In the past two weeks, how often have you wished you were dead or had thoughts that you would be better off dead?	Nearly every day
562	1.23.2.Q2b	Was there ever another time in the past when you often wished you were dead or thought you would be better off dead?	Yes
563	1.23.2.Q2c	When was that?	Month:January / Year:2019
564	1.23.3.Q1	In the past two weeks, how often did you think about wanting to kill yourself?	Several days
566	1.23.3.Q2b	Was there ever another time when you thought about wanting to kill yourself?	No
567	1.23.4.Q1	In the past two weeks, did you make a suicide attempt and do something to try to kill yourself?	Yes
568	1.23.4.Q2	I appreciate you telling me that. I will ask you more about that later.	
570	1.23.4.Q3b	Was there ever another time when you did something to try to kill yourself and made a suicide attempt?	No
571	1.23.4.Q4	Thank you for answering these difficult questions.  For immediate support you can talk to a trusted adult, call your current mental health provider, if you have one, the Suicide Hotline at 1-800-273-8255, the United Way 24-7 Helpline at 2-1-1, or reach out to local emergency resources.  To view helpline for other countries, please click here.	

811	2.23.11.Q1	You mentioned that in the past two weeks you had made a suicide attempt. What did you do?	Other (type in):not administered,	
812	2.23.11.Q2	Did you think that you had at least some chance of dying as a result?	No	
813	2.23.5.Q3	You mentioned that in the past, you did some things to hurt yourself, like scratching, cutting, or burning yourself. Were you trying to kill yourself when you did these things?	No	n/a
821	2.23.9.Q2b	You mentioned that in the past, you wished you were dead or thought you would be better off dead. Back then, did you make any preparations for killing yourself?	Bought or stored pills,	
822	2.23.10.Q2	Back then, did you start to do something to end your life, but either stopped yourself or were interrupted by someone else (for example, you were about to take pills or had a gun ready, or were about to jump or hang yourself, but either stopped yourself or were stopped by someone else)?	Yes, but I stopped myself	
823	2.23.11.Q3	You mentioned that there was a time in the past when you made a suicide attempt. How many times in the past have you tried to kill yourself?	2	
824	2.23.11.Q4	Please tell me when this happened and what you did.	Month1:February / Year1:2021 / Happened1: / / Month2:December / Year2:2009 / Happened2: / /	
825	2.23.11.Q5	Did you think that you had at least some chance of dying as a result?	in February 2021~No / in December 2009~No /	
	813 821 822 823	812 2.23.11.Q2  813 2.23.5.Q3  821 2.23.9.Q2b  822 2.23.10.Q2  823 2.23.11.Q3	two weeks you had made a suicide attempt. What did you do?  2.23.11.Q2 Did you think that you had at least some chance of dying as a result?  You mentioned that in the past, you did some things to hurt yourself, like scratching, cutting, or burning yourself. Were you trying to kill yourself when you did these things?  You mentioned that in the past, you wished you were dead or thought you would be better off dead. Back then, did you make any preparations for killing yourself?  Back then, did you start to do something to end your life, but either stopped yourself or were interrupted by someone else (for example, you were about to take pills or had a gun ready, or were about to jump or hang yourself, but either stopped by someone else)?  You mentioned that there was a time in the past when you made a suicide attempt. How many times in the past have you tried to kill yourself?  Please tell me when this happened and what you did.	two weeks you had made a suicide attempt. What did you do?  2.23.11.Q2 Did you think that you had at least some chance of dying as a result?  813 2.23.5.Q3 You mentioned that in the past, you did some things to hurt yourself. Were you trying to kill yourself. Were you trying to kill yourself when you did these things?  821 2.23.9.Q2b You mentioned that in the past, you wished you were dead or thought you would be better off dead. Back then, did you make any preparations for killing yourself?  822 2.23.10.Q2 Back then, did you start to do something to end your life, but either stopped yourself or were interrupted by someone else (for example, you were about to take pills or had a gun ready, or were about to take pills or had a gun ready, or were about to take pills or had a gun ready, or were about to take pills or had a gun ready, or were about to take pills or had a gun ready.  823 2.23.11.Q3 You mentioned that there was a time in the past when you made a suicide attempt. How many times in the past have you tried to kill yourself?  824 2.23.11.Q4 Please tell me when this happened and what you did. Month: February / Year1:2021 / Happened2: // Month2: December / Year2:2009 / Happened2: //  825 2.23.11.Q5 Did you think that you had at least some chance of dying as idm February 2021-No / in December

Homicidality	572	1.24.1.Q1	In the past two weeks, how often did you think seriously about wanting to kill someone?	Nearly every day
	574	1.24.1.Q2b	Was there ever another time that you thought seriously about wanting to kill someone?	Yes
	575	1.24.2.Q1	In the past two weeks, did you actually make any preparations to kill someone, like buy a gun or explosives?	Yes
	577	1.24.2.Q2b	Was there ever another time that you made plans to kill someone or to go on a killing spree?	No
	578	1.24.2.Q3a	You said that in the past you thought seriously about wanting to kill someone. When was that? If you this was true of you more than once, let me know when it was the most serious.	Month:June / Year:2019
	1962	1.24.3.Q1	Thank you for answering these difficult questions.  For immediate support you can talk to a trusted adult, call your current mental health provider, if you have one, the Suicide Hotline at 1-800-273-8255, the United Way 24-7 Helpline at 2-1-1, or reach out to local emergency resources.	
Selective Mutism	171	1.25.1.q1	In the past two weeks, how often were you unable or unwilling to talk in school or other social situations?	More than half the days
	172	1.25.1.q2	How long have you been unable or unwilling to talk in these social situations? Please enter weeks, months, or years.	weeks:1 / months:0 / years:0
	1553	2.25.2.Q1	You mentioned earlier that there are times when you are	No

		unable or unwilling to talk in school or other social situations. Is the reason you are unable or unwilling to talk because you can't speak the language very well?		
1555	2.25.3.Q1A	With friends	Yes	
1556	2.25.3.Q1B	With your family	No	
1557	2.25.3.Q1C	At school	Yes	
1558	2.25.3.Q1D	At work	No	
1559	2.25.3.Q1E	In after school activities	No	
1560	2.25.3.Q1F	In other places or times	No	
1554	2.25.3.Q1	Does being unable or unwilling to talk in these situations cause problems for you in any of the following areas: Check all that apply.		
580	1.99.99.Q1	There are a series of more questions I will be asking you. Feel free to stand up and stretch and take a brief break before we begin. Press the next button when you are ready to start the interview again.		