

CHILD'S NAME/ID:

DATE:

## THE HOSPITAL FOR SICK CHILDREN - DEPARTMENT OF PSYCHIATRY

## PARENT INTERVIEW FOR CHILD SYMPTOMS (PICS-7.1)

Revised for DSM-5 (2016 and 2021)

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## DISRUPTIVE DISORDERS MODULE

The clinician/interviewer should rate the severity of symptoms on the following scale:

0 = absent

1 = dubious or trivial abnormality and no/minimal impairment

2 = definite abnormality and somewhat impairment

3 = marked abnormality and severely impairing

9 = not known or unable to rate

Ratings of 2 or 3 are clinically significant and contribute to a diagnosis. See Administration Guidelines & Scoring Guidelines for more information.

**ATTENTION DEFICIT HYPERACTIVITY DISORDER (MULTIPLE SYMPTOM DISORDER)**

The essential features that define ADHD are a developmentally inappropriate, persistent pattern of difficulties with **inattention, hyperactivity and impulsivity**.

**Inattention:** refers to deficits in either selecting what to attend to or in sustaining attention (keeping attention focused) for as long as necessary to perform a task.

**Impulsivity:** relates to individual difficulties restricting behaviors or delaying responses as the situation demands (i.e. blurting out answers before questions have been completed, difficulty waiting one's turn, etc.).

**Hyperactivity:** relates to excesses in physical movement, especially movements that have a purposeless, poorly directed or driven quality.

### General introductory questions:

"I am going to ask you about your child's behaviour in several different situations for example while playing out of doors, playing in doors, while doing homework etc. I am doing this because few children behave in the same way in all situations.

Not all of these situations may be problematic for your son (daughter). I ask everyone the same questions in the same way. It doesn't mean that I think that your child has or should have the difficulties that I will ask about.

Describe his/her behaviour to me in enough detail so that I can get a picture in my own mind of what I might have seen had I been watching with you."

**\*\*If the child is taking stimulant medication, rate behaviour off medication.**

### LEISURE TIME OUTDOORS

The first situation is at physical play (outdoors).

- What is your child's favorite outdoor activity?
- What is s/he like when playing these activities?
- What about playing in the park, in the street, yard, beach?
- Considering age, does s/he often abandon one activity for another?
- Can you give me examples of what you mean?
- When was the last time you saw this sort of behaviour? (*Probe for activity, distractibility, planfulness, concentration etc.*)
- If the informant starts to describe other situations, try to bring them back to the topic at hand. You can score these items if the information provided is sufficient. If the informant is desperate to discuss another area you can shift to that topic.

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In general terms, what is your child's level of activity?

Does s/he **RUN ABOUT OR CLIMB** excessively?

During inappropriate times or situations?

ADHD  
2C [ ] 201

Are they often "**ON THE GO**" or acts as if "**DRIVEN BY A MOTOR**"?

ADHD  
2E [ ] 202

Does s/he often **LOSE THINGS** necessary for the activity?

ADHD  
1G [ ] 205

What if s/he is playing with other children - can s/he **WAIT HIS/HER TURN** in games or other group situations?  
*[For older adolescents or adults: waiting in line]*

ADHD  
2H    |    |    206

Does s/he **BUTT INTO** others' games?

ADHD  
2I    |    |    207

Some children **PLAY QUIETLY** outside, others are on the noisy side.  
How would you describe your child?

ADHD  
2D    |    |    208

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The next situation is at **leisure play indoors**.

- What are your child's favorite indoor activities when s/he has free time?
- What activities does s/he choose to do alone?
- What about reading, hobbies, puzzles? How does s/he set about this activity?
- Can s/he plan out an activity?

### **LEISURE TIME ALONE INDOORS**

*You are looking for a description of behaviour during an activity which requires sustained attention and mental effort.*

Does your child often require your help in planning or structuring leisure activities? Can s/he structure his/her own activities?

How organized or **DISORGANIZED** is s/he?

*[For adults: difficulty managing sequential tasks, keeping materials or belongings in order, producing work that is messy or disorganized, showing poor time management, or tending to fail to meet deadlines]*

ADHD  
1E    ☐    ☐    211

What activities does your child enjoy on his/her own?

Which ones would s/he **AVOID**?

Does your child typically avoid activities that require thinking or developing a strategy?

ADHD  
1F    ☐    ☐    212

Can s/he **CONCENTRATE RIGHT THROUGH** until s/he has finished?

Does s/he often abandon one activity for another as though the novelty of the second activity is its most important feature?

*[For adults: difficulty remaining focused during lectures, meetings, conversations, or reading lengthy material]*

ADHD  
1B    ☐    ☐    213

Is the lack of persistence a result of **DISTRACTIBILITY**?

ADHD  
1H    L        J    214

How much **ATTENTION** does s/he pay **TO DETAIL**?

ADHD  
1A    L        J    215

Does s/he often **LOSE THINGS** necessary for the activity?

ADHD  
1G    L        J    216

Does s/he **PLAY QUIETLY**?

When it is play time does s/he make a lot of noise?

ADHD  
2D    L        J    217

During leisure or less-structured time, does  
s/he **RUN ABOUT OR CLIMB EXCESSIVELY**?

ADHD  
2C    L        J    218

At these times would you say s/he is often "**ON THE GO** "  
or acts as if "**DRIVEN BY A MOTOR**"?

ADHD  
2E    L        J    219

## **LEISURE TIME WITH OTHERS INDOORS (PLAYING WITH THE PARENT)**

- What kind of games do you and your child play indoors?

When you are playing a game with your child (e.g. cards, board game) and you try to explain something (rules, strategy, etc.), does s/he look at you when spoken to, directly? Or **NOT LISTEN WHEN SPOKEN TO**?

ADHD  
1C    |    |    221

Do you have to check to make sure that s/he “got the message”?  
Does s/he take it in?

Does s/he have **DIFFICULTY STAYING SEATED**? (gross motor-changing from sitting to standing or walking to running)

ADHD  
2B    |    |    222

What about **FOLLOWING THROUGH ON INSTRUCTIONS**?

ADHD  
1D    |    |    223

Is s/he often **FORGETFUL**?

*[For older adolescents and adults: forgetting to return calls, pay bills, keep appointments]*

ADHD  
1I    |    |    224

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## **LEISURE TIME WITH OTHER CHILDREN**

- Describe your child when s/he is playing with other children in your home, at day care, or in other social situations like clubs or after-school programs.

Does s/he have **DIFFICULTY WAITING TURNS** in games or group situations?

ADHD  
2H    |    |    231

Does s/he **BUTT INTO** other children's games?

ADHD  
2I    |    |    232

Does s/he **BLURT OUT** comments without giving others a chance to finish what they were saying?

Does s/he typically not take turns in conversations (e.g. interrupts or takes over)?

ADHD  
2G    |    |    233

In these situations with other children, is s/he mostly quiet or does s/he **TALK EXCESSIVELY**?

ADHD  
2F    |    |    234

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## **TV**

- Does your child like to watch TV or other on-screen material?
- How does s/he behave while watching? How long does s/he watch at one time/in one sitting?
- Does s/he take it in?

Does s/he have **DIFFICULTY SUSTAINING ATTENTION**?

Does s/he lose concentration quickly?

ADHD  
1B    |    |    241

Is s/he **DISTRACTIBLE** while watching?

ADHD  
1H    |    |    242

To what extent is s/he **FIDGETING OR SQUIRMING** while watching?

ADHD  
2A    |    |    243

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## **HOMEWORK**

- In general, what is your child's approach to homework?
- Would you say that s/he is motivated/unmotivated to do it?

Does s/he go out his/her way to <b>AVOID</b> homework?	ADHD 1F			251
Is s/he organized or <b>DISORGANIZED</b> ?				
Does the child have the required materials arranged in an appropriate way? Does s/he follow reasonable steps in starting and completing a homework task?	ADHD 1E			252
How is your child when it comes to <b>PAYING ATTENTION TO DETAILS</b> ?				
If the child is doing a math sheet, does s/he notice when signs change from addition to subtraction?" or "Does s/he do homework without reading through the instructions carefully?"	ADHD 1A			253
Does s/he <b>OFTEN LEAVE THE SEAT</b> ?	ADHD 2B			254

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#### **DINNER TABLE**

- What is your child like at the dinner table? Is s/he expected to ask permission to leave the table?
- Many children find it difficult to sit at the table – can s/he stay seated at the table?

Is s/he <b>FIDGETY</b> ? (fine motor-fiddling with objects)	ADHD 2A			261
Does s/he <b>TALK EXCESSIVELY</b> ?	ADHD 2F			262
Does s/he <b>BLURT OUT</b> requests or answers to questions being made?	ADHD 2G			263



**Note: There are 3 additional items of ADHD in the ODD section**

**OPPOSITIONAL DEFIANT DISORDER (MULTIPLE SYMPTOM DISORDER)**

The essential feature of Oppositional Defiant Disorder is a pattern of angry/irritable mood, argumentative/defiant behaviour, or vindictiveness. Presence of at least 4 symptoms lasting at least 6 months, exhibited during interaction with at least one individual who is not a sibling.

**Symptom Scoring:**

0 = not at all; 1 = dubious or trivial; 2 = definite and clinically significant; 3 = severe; 9 = not known/unable to rate

**General introductory questions:**

- Does your child have any jobs, chores, or responsibilities at home?
- What type of household rules do you have?
- What expectations for household chores do you have of your child (e.g. washing dishes, keeping room tidy)?
- How does your child react to rules and responsibility? Bedtime, curfews, etc.?
- Is s/he cooperative and easy to get along with at home?
- How does your child get along with other family and non-family adults?

Most of the time, when you make a request does s/he comply or do you get the feeling that s/he just **DOESN'T SEEM TO LISTEN**?

(rate only if child is inattentive rather than disobedient)

ADHD  
1C    [       ]    264

Is it because s/he has **DIFFICULTIES FOLLOWING INSTRUCTIONS**

ADHD  
1D    [       ]    265

Does s/he seem to be **FORGETFUL**? (e.g. routines, chores)

ADHD  
1I    [       ]    266

**Argumentative/Defiant Behaviour**

Does your child often **ARGUE** with adults?

Is s/he polite? Or does s/he tend to be “lippy” and talks back?

ODD  
4    [       ]    274

How does your child handle requests from you or other adults?

Does s/he typically do as you ask?

Or does s/he often actively **DEFY** or **REFUSE TO COMPLY** with requests from authority figures or with rules?

ODD  
5    [       ]    275

Does your child deliberately push other people's buttons?

Or does s/he go out of his/her way to bug others?

Does s/he **DELIBERATELY ANNOY** others?

ODD  
6 [ ] 276

Does your child accept responsibility for his/her mistakes or misbehaviour? Or does s/he often **BLAME OTHERS**?

ODD  
7 [ ] 277

General introductory questions for the temper outbursts (ODD, IED and DMDD):

- How does your child react when things don't go his/her way?
- How often does your child lose his/her self-control or **TEMPER**?
- What does s/he do when angry?
- Does your child have explosive outbursts? How often?
- What triggers the outbursts?
- What would be an example of a typical trigger for the outbursts?
- Does your child often seem irritable (easily annoyed, easily angered)?
- What is his/her mood like between outbursts?
- How do you handle tempers? How does your spouse handle tempers?

**Angry/Irritable Mood**

How often does your child lose his/her self-control or **TEMPER**?

ODD  
1 [ ] 271

Is s/he **TOUCHY** or **EASILY ANNOYED**?

Do little things often rub him/her the wrong way?

Does s/he tend to misinterpret others' behaviours as negative and targeted towards him/her?

ODD  
2 [ ] 272

How does s/he react if things don't go his/her way?

Does s/he often get **ANGRY** or **RESENTFUL**?

ODD  
3 [ ] 273

**Vindictiveness**

Does your child hold grudges? Does s/he try to get back at others?

Is s/he **SPITEFUL** or **VINDICTIVE**?

(At least twice within the past 6 months)

ODD  
8 [ ] 278

### **INTERMITTENT EXPLOSIVE DISORDER (MULTIPLE SYMPTOM DISORDER)**

*The essential feature of Intermittent Explosive Disorder is the impulsive (or anger-based) aggressive outbursts, often to the point of rage, that are disproportionate to the situation at hand. Outbursts are impulsive, not premeditated and extremely difficult to predict.*

#### **Symptom Scoring:**

**0** = not at all; **1** = dubious or trivial; **2** = definite and clinically significant; **3** = severe; **9** = not known/unable to rate

**RECURRENT VERBAL AGGRESSION** (e.g. temper tantrums, tirades, verbal arguments/fights) or **PHYSICAL AGGRESSION** (occurring 2/week for at least 3 months)? (Doesn't lead to destruction of property or physical injury)

IED A1       

At least 3 **BEHAVIOURAL OUTBURSTS** involving injury or destruction within a 1 year period?

IED A2       

#### **The following criteria are coded as:**

**0** = No

**1** = Yes

**9** = Not known or unable to rate

Aggressive behaviour is **GROSSLY DISPROPORTIONATE** to magnitude of stressors?

IED B       

Outbursts are **NOT PREMEDITATED** and aren't designed to achieve tangible objective (e.g. money, power)?

IED C       

Outbursts cause **DISTRESS OR IMPAIRMENT**, or lead to **FINANCIAL/LEGAL CONSEQUENCES**?

IED D       

Child is at least 6 years old?

IED E

Can outbursts be explained by another mental/physical disorder or substance use?

IED F    ☐    ☐

## **DISRUPTIVE MOOD DYSREGULATION DISORDER (MULTIPLE SYMPTOM DISORDER)**

**Note:** this is a mood disorder and is listed in the mood disorder section of the PICS C as well. It is added here due to the temper outbursts being a prominent symptoms (overlap with some symptoms of IED and ODD).

*The core feature of disruptive mood dysregulation disorder is chronic, severe, persistent irritability. The severe irritability has two prominent manifestations: frequent temper outbursts and chronic, persistent irritability or angry mood that is present between the severe temper outbursts.*

### **Symptom Scoring:**

**0** = not at all; **1** = dubious or trivial; **2** = definite and clinically significant; **3** = severe; **9** = not known/unable to rate

Severe, recurrent **TEMPER TANTRUMS** manifested verbally and/or behaviourally that are grossly out of proportion in intensity or duration to the situation or provocation?

DMDD A [ ]

Temper outbursts **INCONSISTENT WITH DEVELOPMENTAL AGE**?

DMDD B [ ]

Temper outbursts occur, on average **3 OR MORE TIMES PER WEEK**?

DMDD C [ ]

Mood between outbursts is **PERSISTENTLY IRRITABLE OR ANGRY** most of the day, nearly every day, and observable by others?

DMDD D [ ]

### **The following criteria are coded as:**

**0** = No

**1** = Yes

**9** = Not known or unable to rate

### **DURATION**

Have criteria A – D been met and present for **12 OR MORE MONTHS**, without a relief period of **MORE THAN 3 MONTHS**?

DMDD E [ ]

Are criteria A – D present in **MULTIPLE SETTINGS** (e.g. at home, with peers) and are severe in at least one of these settings?

DMDD F [ ]

### **ONSET**

Is child between **6 – 18 YEARS OLD** and onset of symptoms was **BEFORE 10 YEARS OLD**?

DMDD G [ ]

### **NOT SECONDARY**

Are symptoms occurring exclusively during an episode of Major Depressive Disorder or can the outbursts **BE EXPLAINED BY ANOTHER MENTAL OR PHYSICAL DISORDER** (ASD, PTSD, Persistent Depressive Disorder) or substance use?

DMDD H [ ]

**CONDUCT DISORDER (MULTIPLE SYMPTOM DISORDER)**

*The essential feature of Conduct Disorder is a repetitive and persistent pattern of behaviour in which the basic rights of others or major age-appropriate societal norms or rules are violated, including aggression to people and animals, destruction of property, deceitfulness and theft. At least 3 symptoms present in the last 12 months and 1 present in the last 6 months.*

**Symptom Scoring:**

**0** = not at all; **1** = dubious or trivial; **2** = definite and clinically significant; **3** = severe; **9** = not known/unable to rate

**AGGRESSION TO PEOPLE & ANIMALS**

Does s/he often <b>VERBALLY BULLY, THREATEN</b> or <b>INTIMIDATE</b> other kids?	CD 1			281
Does s/he <b>INITIATE PHYSICAL FIGHTS</b> , is s/he physically aggressive?	CD 2			282
Has s/he <b>USED A WEAPON</b> that can cause serious physical harm to others? (e.g. bat, brick, broken bottle, knife, gun)	CD 3			283
Has s/he been <b>PHYSICALLY CRUEL TO PEOPLE</b> ?	CD 4			284
Has s/he been <b>PHYSICALLY CRUEL TO ANIMALS</b> ?	CD 5			285
Has s/he <b>STOLEN</b> while <b>CONFRONTING</b> the victim? (e.g. <b>MUGGING</b> , purse snatching, extortion, armed robbery)	CD 6			286
Has s/he <b>FORCED SOMEONE INTO SEXUAL ACTIVITY</b> ?	CD 7			287

**DESTRUCTION OF PROPERTY**

Has s/he deliberately engaged in <b>FIRE SETTING</b> with the intention of causing damage?	CD 8			288
Has s/he deliberately destroyed others' property? ( <b>VANDALISM</b> )	CD 9			289

## DECEITFULNESS/THEFT

Has s/he <b>BROKEN INTO</b> someone else's house, building or car?	CD 10			290
Does s/he often <b>LIE</b> to obtain goods or favours, or to avoid obligations? ("CONS " others)	CD 11			291
Has s/he <b>STOLEN</b> items of non-trivial value <b>WITHOUT CONFRONTING</b> the victim? (e.g. shoplifting, forgery, etc.)	CD 12			292

## SERIOUS VIOLATIONS OF RULES

Does s/he often <b>STAY OUT AT NIGHTS</b> despite parental prohibition?	CD 13			293
Has s/he <b>RUN AWAY</b> from home <b>OVERNIGHT</b> ? (at least twice, while living with parents or surrogate home)	CD 14			294
Is s/he often <b>TRUANT</b> from <b>SCHOOL</b> ? (beginning before age 13)	CD 15			295

## TYPE OF CONDUCT DISORDER

*(To be completed by the clinician after considering all information available. Rate child on each dimension listed)*

### PHYSICAL AGGRESSION:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
No aggression					<u>Typically</u> , aggressive behavior characterized by hitting, use of weapons, or objects

### VERBAL AGGRESSION:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
No aggression					<u>Typically</u> , aggression involves verbal attacks

### REACTIVITY VS. PROACTIVITY:

<i>reactive</i>					<i>proactive</i>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
Aggression typically in response to provocation, rarely planned, impulsive.					Aggression <u>rarely</u> a response to provocation, <u>typically</u> planned, <u>rarely</u> impulsive

### HOSTILITY VS. INSTRUMENTAL BEHAVIOUR:

<i>hostile</i>					<i>Instrumental</i>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
Rarely an attempt to achieve a specific goal or obtain an object, typically an act designed exclusively to hurt another.					Typically an attempt to achieve a specific goal or obtain an object, rarely an act designed exclusively to hurt another.