

Behavior Assessment System for Children, Third Edition (BASC<sup>™</sup>-3) BASC-3 Parent Rating Scales - Child Interpretive Summary Report *Cecil R. Reynolds, PhD, & Randy W. Kamphaus, PhD* 

	Child Information		<b>Test Information</b>
ID:	12345	Test Date:	07/17/2015
Name:	Sample Examinee	Rater Name:	Anne Sample
Gender:	Female	Rater Gender:	Female
Birth Date:	06/01/2005	Relationship:	Mother
Age:	10:1	Administration	
		Language:	English
Grade:	5th		
School:	Riverview School		

Norm Group 1: General Combined



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[ 1.0 / RE1 / QG1 ]

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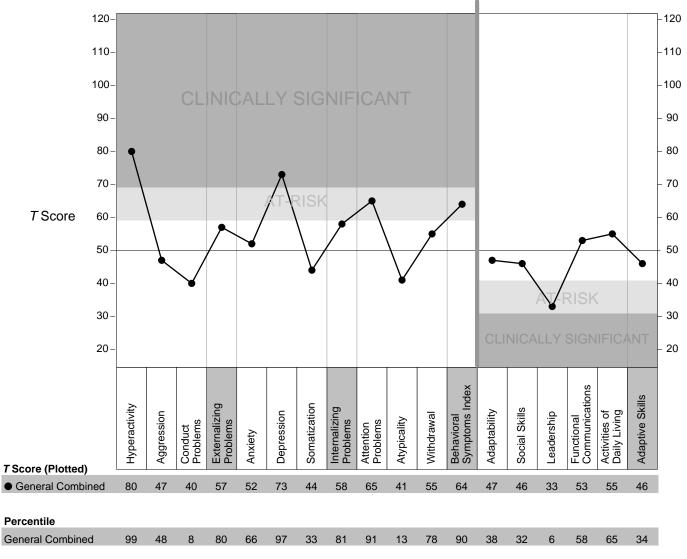
## **COMMENTS AND CONCERNS**

No comments or concerns were provided.

## VALIDITY INDEX SUMMARY

F Index	Response Pattern	Consistency
Acceptable	Acceptable	Acceptable
Raw Score: 0	Raw Score: 130	Raw Score: 10

## **CLINICAL AND ADAPTIVE T-SCORE PROFILE**



# **CLINICAL AND ADAPTIVE SCORE TABLE: General Combined Norm Group**

### **Composite Score Summary**

	Raw Score	T Score	Percentile Rank	90% Confidence Interval
Externalizing Problems	167	57	80	53-61
Internalizing Problems	169	58	81	54-62
Behavioral Symptoms Index	361	64	90	60-68
Adaptive Skills	234	46	34	43-49

Composite Comparisons	Difference	Significance Level	Frequency of Difference
Externalizing Problems vs. Internalizing Problems	-1	NS	

Mean <i>T</i> score of the BSI	60
Mean T score of the Adaptive Skills Composite	47

### **Scale Score Summary**

					l	osative Compariso	n
	Raw Score	T Score	Percentile Rank	90% Confidence Interval	Difference	Significance Level	Frequency of Difference
Hyperactivity	22	80	99	73-87	20	0.05	1% or less
Aggression	2	47	48	39-55	-13	0.05	5% or less
Conduct Problems	1	40	8	34-46	-20	0.05	2% or less
Anxiety	13	52	66	46-58	-8	NS	
Depression	17	73	97	67-79	13	0.05	5% or less
Somatization	3	44	33	38-50	-16	0.05	15% or less
Atypicality	0	41	13	35-47	-19	0.05	1% or less
Withdrawal	7	55	78	49-61	-5	NS	
Attention Problems	13	65	91	60-70	5	NS	
Adaptability	14	47	38	41-53	0	NS	
Social Skills	19	46	32	41-51	-1	NS	
Leadership	5	33	6	27-39	-14	0.05	1% or less
Activities of Daily Living	20	55	65	48-62	8	NS	
Functional Communication	28	53	58	47-59	6	NS	

Note: All classifications of test scores are subject to the application of the standard error of measurement (*SEM*) when making classification decisions. Individual clinicians are advised to consider all case-related information to determine if a particular classification is appropriate. See the BASC-3 Manual for additional information on *SEM*s and confidence intervals.

## VALIDITY INDEX NARRATIVES

The BASC-3 *F* Index is a classically derived infrequency scale, designed to assess the possibility that a rater has depicted a child's behavior in an inordinately negative fashion. The *F* Index consists of items that represent maladaptive behaviors to which the rater answered "almost always" and adaptive behaviors to which the rater responded "never."

The *F* Index score produced from the ratings of Sample by Anne falls within the **Acceptable** range and does not indicate the presence of negative response distortion.

The Consistency Index identifies situations when the rater has given inconsistent responses to items that are typically answered in a similar way, based on comparisons made to raters from the general population. The Consistency Index was designed to identify ratings that might not be easily interpretable due to these response discrepancies.

The Consistency Index score produced from the ratings of Sample by Anne falls within the **Acceptable** range and indicates the rater consistently answered items when completing the rating form.

## VALIDITY INDEX ITEM LISTS

Validity Index ratings for F Index, D Index, Response Pattern Index, and Consistency Index are all Acceptable.

### **F**Index

The *F* Index rating is Acceptable.

#### **Response Pattern Index**

The Response Pattern Index rating is Acceptable.

#### **Consistency Index**

The Consistency Index rating is Acceptable.

## CLINICAL AND ADAPTIVE SCALE NARRATIVES

This report is based on Anne Sample's rating of Sample's behavior using the BASC-3 Parent Rating Scales form. The narrative and scale classifications in this report are based on *T* scores obtained using norms. Scale scores in the Clinically Significant range suggest a high level of maladjustment. Scores in the At-Risk range may identify a significant problem that may not be severe enough to require formal treatment or may identify the potential of developing a problem that needs careful monitoring.

### **Externalizing Problems**

The Externalizing Problems composite scale *T* score is 57, with a 90% confidence interval range of 53-61 and a percentile rank of 80.

Sample's *T* score on Hyperactivity is 80 and has a percentile rank of 99. This *T* score falls in the Clinically Significant classification range and usually warrants follow-up. Sample's mother reports that Sample engages in many disruptive, impulsive, and uncontrolled behaviors.

Sample's *T* score on Aggression is 47 and has a percentile rank of 48. Sample's mother reports that Sample tends not to act aggressively any more often than others of her age.

Sample's *T* score on Conduct Problems is 40 and has a percentile rank of 8. Sample's mother reports that Sample demonstrates rule-breaking behavior no more often than others her age.

#### **Internalizing Problems**

The Internalizing Problems composite scale *T* score is 58, with a 90% confidence interval range of 54-62 and a percentile rank of 81.

Sample's *T* score on Anxiety is 52 and has a percentile rank of 66. Sample's mother reports that Sample displays anxiety-based behaviors no more often than others her age.

Sample's *T* score on Depression is 73 and has a percentile rank of 97. This *T* score falls in the Clinically Significant classification range and follow-up may be necessary. Sample's mother reports that Sample is withdrawn, pessimistic, and/or sad. Scores in this range usually warrant assessment of vegetative symptoms (e.g., weight loss or gain, fatigue). Suicidal tendencies should also be explored.

Sample's *T* score on Somatization is 44 and has a percentile rank of 33. Sample's mother reports that Sample complains of health-related problems to about the same degree as others her age.

### **Behavioral Symptoms Index**

The Behavioral Symptoms Index (BSI) composite scale T score is 64, with a 90% confidence interval range of 60-68 and a percentile rank of 90. Sample's T score on this composite scale falls in the At-Risk classification range. Scale summary information for Hyperactivity, Aggression, and Depression (scales included in the BSI) has been provided above. Scale summary information for the remaining BSI scales is given next.

Sample's *T* score on Atypicality is 41 and has a percentile rank of 13. Sample's mother reports that Sample generally displays clear, logical thought patterns and she is generally aware of her surroundings.

Sample's *T* score on Withdrawal is 55 and has a percentile rank of 78. Sample's mother reports that Sample does not avoid social situations and appears to be capable of developing and maintaining friendships with others.

Sample's *T* score on Attention Problems is 65 and has a percentile rank of 91. This *T* score falls in the At-Risk classification range and follow-up may be necessary. Sample's mother reports that Sample has difficulty maintaining necessary levels of attention at school. The problems experienced by Sample might disrupt academic performance and functioning in other areas.

### **Adaptive Skills**

The Adaptive Skills composite scale *T* score is 46, with a 90% confidence interval range of 43-49 and a percentile rank of 34.

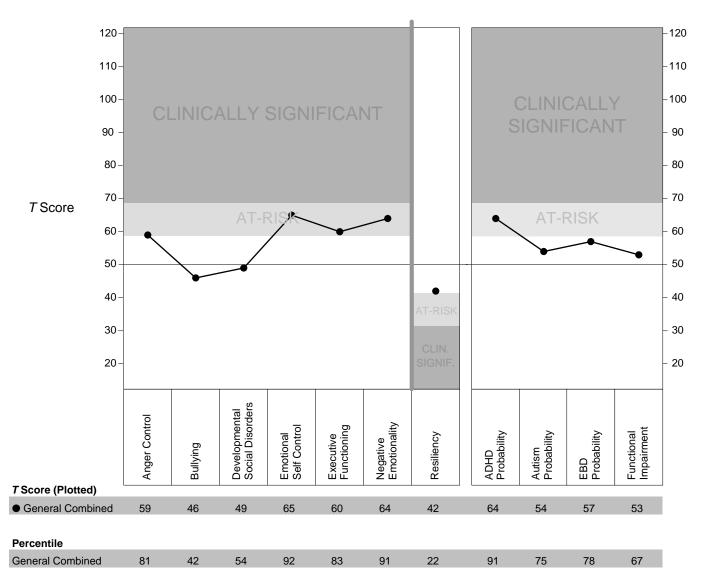
Sample's *T* score on Adaptability is 47 and has a percentile rank of 38. Sample's mother reports that Sample is able to adapt as well as most others her age to a variety of situations.

Sample's *T* score on Social Skills is 46 and has a percentile rank of 32. Sample's mother reports that Sample possesses sufficient social skills and generally does not experience debilitating or abnormal social difficulties.

Sample's *T* score on Leadership is 33 and has a percentile rank of 6. This *T* score falls in the At-Risk classification range and follow-up may be necessary. Sample's mother reports that Sample sometimes has difficulty making decisions, lacks creativity, and/or has trouble getting others to work together effectively.

Sample's *T* score on Activities of Daily Living is 55 and has a percentile rank of 65. Sample's mother reports that Sample is able to adequately perform simple daily tasks in a safe and efficient manner.

Sample's *T* score on Functional Communication is 53 and has a percentile rank of 58. Sample's mother reports that Sample generally exhibits adequate expressive and receptive communication skills and that Sample is usually able to seek out and find new information when needed.



## CONTENT SCALE AND INDEX T-SCORE PROFILE

## **CONTENT SCALE SCORE TABLE: General Combined Norm Group**

	Raw Score	T Score	Percentile Rank	90% Confidence Interval
Anger Control	9	59	81	52-66
Bullying	1	46	42	40-52
Developmental Social Disorders	10	49	54	43-55
Emotional Self-Control	14	65	92	59-71
Executive Functioning	30	60	83	55-65
Negative Emotionality	9	64	91	57-71
Resiliency	12	42	22	36-48

#### **Content Scale Narratives**

Sample's *T* score on Anger Control is 59 and has a percentile rank of 81. Sample's mother reports that Sample regulates her affect and self-control under adverse conditions as well as others her age.

Sample's *T* score on Bullying is 46 and has a percentile rank of 42. Sample's mother reports that Sample does not tend to act in a threatening or intrusive manner.

Sample's *T* score on Developmental Social Disorders is 49 and has a percentile rank of 54. Sample's mother reports that Sample has social and communication skills that are typical of others her age.

Sample's *T* score on Emotional Self-Control is 65 and has a percentile rank of 92. This *T* score falls in the At-Risk classification range and follow-up may be necessary. Sample's mother reports that Sample can become easily upset, frustrated, and/or angered in response to environmental changes.

Sample's *T* score on Executive Functioning is 60 and has a percentile rank of 83. This *T* score falls in the At-Risk classification range and follow-up may be necessary. Sample's mother reports that Sample sometimes has difficulty controlling and maintaining her behavior and mood.

Sample's *T* score on Negative Emotionality is 64 and has a percentile rank of 91. This *T* score falls in the At-Risk classification range and follow-up may be necessary. Sample's mother reports that Sample has a tendency to react negatively when faced with changes in everyday activities or routines.

Sample's *T* score on Resiliency is 42 and has a percentile rank of 22. Sample's mother reports that Sample is able to overcome stress and adversity about as well as others her age.

## EXECUTIVE FUNCTIONING INDEX SUMMARY

Overall Executive Functioning Index	Problem Solving Index	Attentional Control Index	Behavioral Control Index	Emotional Control Index
Not Elevated	Not Elevated	Elevated	Elevated	Not Elevated
Raw Score: 38	Raw Score: 11	Raw Score: 13	Raw Score: 11	Raw Score: 3

## **EXECUTIVE FUNCTIONING INDEX NARRATIVES**

Sample's Overall Executive Functioning Index score is 38. This score falls in the Not Elevated classification range. Summary information for problem solving, attentional control, behavioral control, and emotional control is provided below.

Sample's Problem Solving Index score is 11. This score falls in the Not Elevated classification range.

Sample's Attentional Control Index score is 13. This score falls in the Elevated classification range and follow-up may be necessary. Anne reports that Sample sometimes has trouble concentrating, following directions, and may have a tendency to make careless mistakes.

Sample's Behavioral Control Index score is 11. This score falls in the Elevated classification range and follow-up may be necessary. Anne reports that Sample sometimes has difficulty maintaining her self-control and has difficulty regulating impulsive behaviors.

Sample's Emotional Control Index score is 3. This score falls in the Not Elevated classification range.

## **CLINICAL SUMMARY NARRATIVES**

The BASC-3 items endorsed by Sample's parent/guardian resulted in a clinically significant Hyperactivity scale score, a pattern that occurred in 4.7% of the standardization sample. Children with this profile may exhibit problems with behavioral regulation and may be overactive, impulsive, and disruptive. Given this profile, possible diagnostic considerations might include attention-deficit/hyperactivity disorder (ADHD). These problems are likely to occur across multiple settings (e.g., school, home) and to be worse in situations requiring sustained mental effort.

Sample's profile is characterized by an at-risk Attention Problems scale score in addition to a clinically significant Hyperactivity scale score. In making diagnostic considerations regarding the possibility of ADHD, such a profile is probably more consistent with a diagnosis of ADHD combined presentation, as opposed to predominantly hyperactive/impulsive or inattentive presentation.

Sample also exhibited an elevation on the BASC-3 internalizing scale of Depression, a pattern that occurred in 64.7% of the BASC-3 standardization sample with a clinically significant Hyperactivity scale score. This profile indicates that she is experiencing increased levels of internal distress characterized by depressed mood, and additional diagnostic considerations are likely to include depressive disorders (e.g., major depressive disorder, bipolar disorder). Children with these problems may exhibit inattention and restlessness, which can appear behaviorally similar to ADHD. Furthermore, it may be the case that emotional distress is causing Sample to act out, or that negative feedback related to her behavioral issues is resulting in these internalizing problems. Thus, further investigation is warranted in order to clarify the complex relationship between her various behavioral and mood symptoms.

If it is believed that Sample is exhibiting comorbid mood and behavioral problems, the following considerations may be helpful. With respect to ADHD, it is useful to note that symptoms of hyperactivity or inattention are typically present before age 7 in ADHD, whereas the onset of these behaviors may occur later in mood disorders. Furthermore, children with ADHD are likely to exhibit these symptoms in situations that require sustained effort but are motivated by highly reinforcing activities. Conversely, individuals with depression may be more likely to exhibit poor motivation and behavioral agitation even while engaged with pleasurable activities. ADHD can be diagnosed with mood difficulties if criteria for both diagnoses are met. In these cases, it is important to note that restlessness and inattention are typically rated positively for mood disorders only in cases where they are significantly worse during periods of mood disturbance relative to what is accounted for by ADHD alone.

Children who experience difficulties with hyperactivity and attention problems present a unique challenge to parents. They may require frequent redirection, more consistent parenting practices, and stronger reinforcements/consequences in order to manage their behavior. The relationship can be characterized by communication and problem-solving deficits, and the parent and child may experience fewer feelings of warmth and closeness. Parents may also struggle with discipline and feel frustrated, and thus family involvement is often a core component of interventions for behavioral problems. Thus, an evaluation of the parent-child relationship (e.g., using the BASC-3 Parenting Relationship Questionnaire) might be helpful in developing and implementing a comprehensive treatment plan. Specifically, identifying areas of weakness in the parent-child relationship (e.g., conflict, communication) might help the therapist prioritize treatment goals.

## DSM-5<sup>™</sup> DIAGNOSTIC CRITERIA

Listed below are *DSM-5* Diagnostic Criteria based on the ratings obtained from Anne on the PRS-C rating form. Each section first presents a list of symptoms of the disorder, along with PRS-C items that correspond to these symptoms. Then related *DSM-5* criteria and codes are presented. While information from PRS-C items will likely be helpful for making a diagnosis, clinicians are strongly encouraged to use additional information that is gathered outside of the BASC-3 PRS-C form (e.g., observations of behavior, clinical interviews) when making a formal diagnosis. Reprinted with permission from the *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition (Copyright © 2013).

### Attention-Deficit/Hyperactivity Disorder (ADHD)

### List of Symptoms

S	Symptoms for ADHD: Inattention	Relevant BASC-3 PRS-C Items and Anne Sample's Responses
	Does not pay close attention to details, or makes careless mistakes	
Х	Has difficulty sustaining attention	<ol> <li>Pays attention. (Sometimes)</li> <li>Has a short attention span. (Often)</li> </ol>
Х	Does not seem to listen when spoken to	28. Listens to directions. (Sometimes) 83. Listens carefully. (Never) 127. Pays attention when being spoken to. (Often)
	Does not follow through on instructions and fails to finish tasks	
	_ Has trouble organizing activities/tasks	
	Dislikes/avoids tasks that involve sustained mental effort	
	Loses necessary materials	
	Is easily distracted	91. Is easily distracted. (Sometimes)
	_ Is often forgetful	

Symptoms for ADHD: Hyperactivity/Impulsivity		<u>Relevant BASC-3 PRS-C Items and Anne Sample's</u> <u>Responses</u>
Х	Fidgets or squirms excessively	93. Fiddles with things while at meals. (Often)
	Leaves seat inappropriately	
х	Feels restless	151. Is unable to slow down. (Often)
	Has difficulty engaging in activities quietly	
Х	Acts as if "driven by a motor"	32. Is overly active. (Often) 73. Has poor self-control. (Often) 166. Acts out of control. (Often)
	Talks excessively	
Х	Blurts out answers	24. Acts without thinking. (Often)
Х	Has trouble waiting her turn	172. Cannot wait to take turn. (Often)
Х	Interrupts others' conversations or activities	42. Interrupts others when they are speaking. (Often) 114. Disrupts other children's activities. (Often) 159. Interrupts parents when they are talking on the phone. (Often)

### DSM-5 Codes and Diagnostic Criteria

### Attention-Deficit/Hyperactivity Disorder (ADHD) 314.0x (F90.x)

See the Q-global Resource Library for a reprint of the DSM-5 Diagnostic Criteria for ADHD.

### Major Depressive Disorder

### List of Symptoms

Syr	nptoms for Major Depressive Episode	<u>Relevant BASC-3 PRS-C Items and Anne Sample's</u> <u>Responses</u>
Х	Depressed (or irritable in children/adolescents) mood most of the day, almost every day	<ul><li>4. Is easily upset. (Sometimes)</li><li>34. Cries easily. (Sometimes)</li><li>60. Is sad. (Often)</li><li>100. Seems lonely. (Often)</li></ul>
	Greatly decreased interest or pleasure in all, or almost all, activities most of the day, almost every day	36. Avoids exercise or other physical activity. (Never)
	Significant weight gain/loss (change of more than 5% of body weight in a month) without dieting, or increase/decrease in appetite almost every day ( <i>Note.</i> For children, failure to make expected weight gains)	
	Insomnia or excessive sleep almost every day	
	Observable psychomotor agitation/retardation almost every day	
	Fatigue/loss of energy almost every day	
Х	Feelings of worthlessness or excessive/inappropriate guilt almost every day	45. Says, "I hate myself." (Sometimes)
	Difficulty thinking, concentrating, or making decisions almost every day	142. Makes decisions easily. (Often)
	Recurrent thoughts about death or suicide, a suicide attempt, or a specific suicide plan	52. Says, "I want to die" or "I wish I were dead." (Never) 124. Says, "I want to kill myself." (Never)

### DSM-5 Codes and Diagnostic Criteria

#### Major Depressive Disorder 296.xx (F32.x and F33.x)

See the Q-global Resource Library for a reprint of the DSM-5 Diagnostic Criteria for Major Depressive Disorder.

### **Disruptive Mood Dysregulation Disorder**

#### List of Symptoms

Symptoms for Disruptive Mood Dysregulation Disorder	Relevant BASC-3 PRS-C Items and Anne Sample's Responses
Area 1: Severe, Recurrent Temper Outbursts	
— Has verbally or physically aggressive temper outbursts	<ul><li>26. Loses control when angry. (Sometimes)</li><li>41. Throws or breaks things when angry. (Never)</li><li>44. Overreacts to stressful situations. (Sometimes)</li></ul>
Area 2: Mood Between Temper Outbursts	
X Persistently irritable or angry mood between temper outbursts	119. Is irritable. (Often) 147. Is easily stressed. (Sometimes)

### DSM-5 Codes and Diagnostic Criteria

#### Disruptive Mood Dysregulation Disorder 296.99 (F34.8)

See the Q-global Resource Library for a reprint of the *DSM-5* Diagnostic Criteria for Disruptive Mood Dysregulation Disorder.

### Persistent Depressive Disorder

### List of Symptoms

Area 1: Depressed Mood	<u>Relevant BASC-3 PRS-C Items and Anne Sample's</u> <u>Responses</u>				
X Depressed mood	<ul><li>34. Cries easily. (Sometimes)</li><li>100. Seems lonely. (Often)</li><li>110. Is negative about things. (Often)</li></ul>				
Area 2: Symptoms Associated With Depressed Mood					
Overeating or decreased appetite					
Insomnia or excessive sleep					
Fatigue or decreased energy					
X Poor self-esteem	45. Says, "I hate myself." (Sometimes) 80. Says, "I don't have any friends." (Often) 129. Says, "Nobody likes me." (Never)				
X Difficulty making decisions or concentrating	<ul><li>11. Has a short attention span. (Often)</li><li>91. Is easily distracted. (Sometimes)</li><li>142. Makes decisions easily. (Often)</li></ul>				
Feeling hopeless	4. Is easily upset. (Sometimes)				

### DSM-5 Codes and Diagnostic Criteria

#### Persistent Depressive Disorder 300.4 (F34.1)

See the Q-global Resource Library for a reprint of the *DSM-5* Diagnostic Criteria for Persistent Depressive Disorder.

### **CRITICAL ITEMS**

This area presents items that may be of particular interest when responses include Sometimes, Often, or Almost always.

- 13. Is a picky eater. (Never)
- 19. Has toileting accidents. (Never)
- 26. Loses control when angry. (Sometimes)
- 35. Threatens to hurt others. (Never)
- 36. Avoids exercise or other physical activity. (Never)
- 45. Says, "I hate myself." (Sometimes)
- 51. Eats things that are not food. (Never)
- 52. Says, "I want to die" or "I wish I were dead." (Never)
- 55. Hurts others on purpose. (Never)
- 58. Confuses real with make-believe. (Never)
- 65. Is cruel to animals. (Sometimes)
- 72. Falls down or trips over things easily. (Never)
- 75. Sleeps with parents. (Never)
- 82. Wets bed. (Never)
- 89. Sets fires. (Never)
- 98. Hits other children. (Never)
- 108. Picks on others who are different from his or her self. (Never)
- 117. Bullies others. (Never)
- 124. Says, "I want to kill myself." (Never)
- 131. Throws up after eating. (Never)
- 136. Has panic attacks. (Never)
- 140. Has seizures. (Never)
- 162. Runs away from home. (Never)

## **ITEMS BY SCALE - CLINICAL SCALES**

#### Aggression

- 35. Threatens to hurt others. (Never)
- 41. Throws or breaks things when angry. (Never)
- 50. Teases others. (Sometimes)
- 59. Manipulates others. (Never)
- 98. Hits other children. (Never)
- 106. Gets back at others. (Never)
- 117. Bullies others. (Never)
- 121. Argues when denied own way. (Sometimes)
- 146. Is overly aggressive. (Never)

#### Anxiety

- 9. Worries. (Sometimes)
- 21. Is fearful. (Sometimes)
- 31. Appears tense. (Sometimes)
- 38. Worries about things that cannot be changed. (Sometimes)
- 54. Worries about what other children think. (Sometimes)
- 67. Worries about what parents think. (Sometimes)
- 84. Is nervous. (Sometimes)
- 104. Says, "It's all my fault." (Sometimes)
- 107. Worries about what teachers think. (Sometimes)
- 112. Says, "I'm not very good at this." (Sometimes)
- 128. Worries about making mistakes. (Sometimes)
- 136. Has panic attacks. (Never)
- 147. Is easily stressed. (Sometimes)
- 160. Says, "I'm afraid I will make a mistake." (Sometimes)

### **Attention Problems**

- 1. Pays attention. (Sometimes)
- 11. Has a short attention span. (Often)
- 28. Listens to directions. (Sometimes)
- 83. Listens carefully. (Never)
- 91. Is easily distracted. (Sometimes)
- 127. Pays attention when being spoken to. (Often)
- 175. Has trouble concentrating. (Often)

### Atypicality

- 12. Acts confused. (Never)
- 17. Seems odd. (Never)
- 58. Confuses real with make-believe. (Never)
- 81. Seems out of touch with reality. (Never)
- 88. Stares blankly. (Never)
- 115. Acts strangely. (Never)
- 122. Says things that make no sense. (Never)
- 125. Acts as if other children are not there. (Never)
- 145. Does strange things. (Never)
- 152. Seems unaware of others. (Never)
- 157. Babbles to self. (Never)
- 158. Speech is confused or disorganized. (Never)

ID: 12345 Sample Examinee

- 167. Shows feelings that do not fit the situation. (Never)
- 171. Does weird things. (Never)

### **Conduct Problems**

- 3. Disobeys. (Never)
- 7. Gets into trouble. (Never)
- 23. Lies. (Sometimes)
- 43. Deceives others. (Never)
- 55. Hurts others on purpose. (Never)
- 68. Breaks the rules. (Never)
- 74. Breaks the rules just to see what will happen. (Never)
- 141. Lies to get out of trouble. (Never)
- 144. Steals. (Never)
- 164. Sneaks around. (Never)

### Depression

- 4. Is easily upset. (Sometimes)
- 34. Cries easily. (Sometimes)
- 40. Changes moods quickly. (Often)
- 45. Says, "I hate myself." (Sometimes)
- 52. Says, "I want to die" or "I wish I were dead." (Never)
- 60. Is sad. (Often)
- 80. Says, "I don't have any friends." (Often)
- 100. Seems lonely. (Often)
- 110. Is negative about things. (Often)
- 116. Says, "I can't do anything right." (Often)
- 119. Is irritable. (Often)
- 124. Says, "I want to kill myself." (Never)
- 129. Says, "Nobody likes me." (Never)

### Hyperactivity

- 24. Acts without thinking. (Often)
- 32. Is overly active. (Often)
- 42. Interrupts others when they are speaking. (Often)
- 73. Has poor self-control. (Often)
- 93. Fiddles with things while at meals. (Often)
- 99. Is in constant motion. (Often)
- 114. Disrupts other children's activities. (Often)
- 151. Is unable to slow down. (Often)
- 159. Interrupts parents when they are talking on the phone. (Often)
- 166. Acts out of control. (Often)
- 172. Cannot wait to take turn. (Often)

### Somatization

- 6. Gets sick. (Sometimes)
- 15. Complains about health. (Never)
- 20. Says, "I think I'm sick." (Sometimes)
- 39. Complains of being sick when nothing is wrong. (Never)
- 49. Complains of pain. (Never)
- 57. Vomits. (Sometimes)
- 63. Expresses fear of getting sick. (Never)
- 78. Has headaches. (Never)
- 105. Has fevers. (Never)
- 118. Complains of physical problems. (Never)

- 132. Complains of stomach pain. (Never)
- 161. Is afraid of getting sick. (Never)

#### Withdrawal

- 48. Is shy with other children. (Never)
- 87. Quickly joins group activities. (Never)
- 96. Avoids other children. (Never)
- 101. Is shy with adults. (Never)
- 111. Has trouble making new friends. (Never)
- 126. Isolates self from others. (Never)
- 156. Avoids making friends. (Never)
- 163. Makes friends easily. (Never)
- 170. Prefers to play alone. (Sometimes)

## **ITEMS BY SCALE - ADAPTIVE SCALES**

#### **Activities of Daily Living**

- 22. Makes healthy food choices. (Often)
- 27. Has trouble following regular routines. (Often)
- 37. Sets realistic goals. (Often)
- 46. Is careless with belongings. (Often)
- 64. Has trouble fastening buttons on clothing. (Never)
- 66. Needs to be reminded to brush teeth. (Never)
- 90. Cleans up after self. (Almost always)
- 149. Organizes chores or other tasks well. (Often)
- 153. Acts in a safe manner. (Almost always)

### Adaptability

- 47. Adjusts well to changes in family plans. (Often)
- 86. Accepts things as they are. (Often)
- 92. Recovers quickly after a setback. (Often)
- 103. Adjusts well to changes in routine. (Often)
- 130. Handles winning and losing well. (Often)
- 133. Is easy to please. (Sometimes)
- 135. Is easily calmed when angry. (Often)
- 143. Adjusts well to new teachers. (Sometimes)

#### **Functional Communication**

- 5. Responds appropriately when asked a question. (Almost always)
- 33. Accurately takes down messages. (Almost always)
- 56. Tracks down information when needed. (Almost always)
- 61. Answers telephone properly.. (Almost always)
- 69. Has difficulty explaining rules of games to others. (Sometimes)
- 76. Communicates clearly. (Almost always)
- 85. Has trouble getting information when needed. (Sometimes)
- 102. Likes to talk about his or her day. (Sometimes)
- 109. Starts conversations. (Often)
- 148. Is clear when telling about personal experiences. (Sometimes)
- 165. Is able to describe feelings accurately. (Almost always)
- 168. Is unclear when presenting ideas. (Sometimes)

### Leadership

- 18. Is a "self-starter." (Sometimes)
- 29. Is usually chosen as a leader. (Never)
- 62. Is good at getting people to work together. (Never)
- 120. Gives good suggestions for solving problems. (Sometimes)
- 142. Makes decisions easily. (Often)
- 155. Prefers to be a leader. (Never)
- 173. Is highly motivated to succeed. (Sometimes)

### **Social Skills**

- 2. Makes positive comments about others. (Often)
- 14. Says, "please" and "thank you." (Almost always)
- 53. Shows interest in others' ideas. (Sometimes)
- 77. Compliments others. (Often)
- 97. Makes others feel welcome. (Often)
- 113. Tries to help others be their best. (Sometimes)
- 134. Accepts people who are different from his or her self. (Almost always)
- 137. Offers help to other children. (Often)
- 154. Encourages others to do their best. (Sometimes)
- 174. Congratulates others when good things happen to them. (Often)

## **ITEMS BY SCALE - CONTENT SCALES**

### Anger Control

- 26. Loses control when angry. (Sometimes)
- 35. Threatens to hurt others. (Never)
- 40. Changes moods quickly. (Often)
- 41. Throws or breaks things when angry. (Never)
- 70. Gets angry easily. (Never)
- 73. Has poor self-control. (Often)
- 119. Is irritable. (Often)
- 121. Argues when denied own way. (Sometimes)
- 135. Is easily calmed when angry. (Often)

### Bullying

- 35. Threatens to hurt others. (Never)
- 43. Deceives others. (Never)
- 50. Teases others. (Sometimes)
- 55. Hurts others on purpose. (Never)
- 59. Manipulates others. (Never)
- 94. Puts others down. (Never)
- 106. Gets back at others. (Never)
- 108. Picks on others who are different from his or her self. (Never)
- 117. Bullies others. (Never)
- 150. Tells lies about others. (Never)

### **Developmental Social Disorders**

- 5. Responds appropriately when asked a question. (Almost always)
- 10. Avoids eye contact. (Never)
- 30. Engages in repetitive movements. (Never)

- 47. Adjusts well to changes in family plans. (Often)
- 53. Shows interest in others' ideas. (Sometimes)
- 58. Confuses real with make-believe. (Never)
- 76. Communicates clearly. (Almost always)
- 103. Adjusts well to changes in routine. (Often)
- 111. Has trouble making new friends. (Never)
- 115. Acts strangely. (Never)
- 125. Acts as if other children are not there. (Never)
- 126. Isolates self from others. (Never)
- 139. Shows basic emotions clearly. (Never)
- 148. Is clear when telling about personal experiences. (Sometimes)
- 152. Seems unaware of others. (Never)
- 157. Babbles to self. (Never)
- 165. Is able to describe feelings accurately. (Almost always)
- 167. Shows feelings that do not fit the situation. (Never)
- 170. Prefers to play alone. (Sometimes)

### **Emotional Self-Control**

- 4. Is easily upset. (Sometimes)
- 21. Is fearful. (Sometimes)
- 34. Cries easily. (Sometimes)
- 40. Changes moods quickly. (Often)
- 44. Overreacts to stressful situations. (Sometimes)
- 73. Has poor self-control. (Often)
- 119. Is irritable. (Often)
- 138. Is overly emotional. (Sometimes)
- 147. Is easily stressed. (Sometimes)
- 166. Acts out of control. (Often)

#### **Executive Functioning**

- 1. Pays attention. (Sometimes)
- 11. Has a short attention span. (Often)
- 16. Plans well. (Sometimes)
- 24. Acts without thinking. (Often)
- 37. Sets realistic goals. (Often)
- 44. Overreacts to stressful situations. (Sometimes)
- 56. Tracks down information when needed. (Almost always)
- 71. Takes a step-by-step approach to work. (Sometimes)
- 73. Has poor self-control. (Often)
- 91. Is easily distracted. (Sometimes)
- 92. Recovers quickly after a setback. (Often)
- 95. Finds ways to solve problems. (Sometimes)
- 120. Gives good suggestions for solving problems. (Sometimes)
- 121. Argues when denied own way. (Sometimes)
- 135. Is easily calmed when angry. (Often)
- 142. Makes decisions easily. (Often)
- 149. Organizes chores or other tasks well. (Often)
- 159. Interrupts parents when they are talking on the phone. (Often)
- 166. Acts out of control. (Often)
- 175. Has trouble concentrating. (Often)

### Negative Emotionality

- 4. Is easily upset. (Sometimes)
- 25. Finds fault with everything. (Sometimes)
- 45. Says, "I hate myself." (Sometimes)
- 52. Says, "I want to die" or "I wish I were dead." (Never)
- 79. Reacts negatively. (Sometimes)
- 110. Is negative about things. (Often)
- 119. Is irritable. (Often)
- 121. Argues when denied own way. (Sometimes)

### Resiliency

- 8. Has good coping skills. (Sometimes)
- 18. Is a "self-starter." (Sometimes)
- 56. Tracks down information when needed. (Almost always)
- 62. Is good at getting people to work together. (Never)
- 92. Recovers quickly after a setback. (Often)
- 95. Finds ways to solve problems. (Sometimes)
- 103. Adjusts well to changes in routine. (Often)
- 123. Overcomes problems. (Never)
- 169. Is resilient. (Often)

## **ITEMS BY SCALE - CLINICAL INDEXES**

### **ADHD Probability**

- 7. Gets into trouble. (Never)
- 11. Has a short attention span. (Often)
- 24. Acts without thinking. (Often)
- 32. Is overly active. (Often)
- 83. Listens carefully. (Never)
- 90. Cleans up after self. (Almost always)
- 91. Is easily distracted. (Sometimes)
- 149. Organizes chores or other tasks well. (Often)
- 151. Is unable to slow down. (Often)
- 166. Acts out of control. (Often)
- 175. Has trouble concentrating. (Often)

### **Autism Probability**

- 17. Seems odd. (Never)
- 30. Engages in repetitive movements. (Never)
- 48. Is shy with other children. (Never)
- 81. Seems out of touch with reality. (Never)
- 96. Avoids other children. (Never)
- 111. Has trouble making new friends. (Never)
- 125. Acts as if other children are not there. (Never)
- 126. Isolates self from others. (Never)
- 155. Prefers to be a leader. (Never)
- 158. Speech is confused or disorganized. (Never)
- 163. Makes friends easily. (Never)
- 168. Is unclear when presenting ideas. (Sometimes)
- 170. Prefers to play alone. (Sometimes)

#### **EBD** Probability

- 4. Is easily upset. (Sometimes)
- 18. Is a "self-starter." (Sometimes)
- 23. Lies. (Sometimes)
- 35. Threatens to hurt others. (Never)
- 40. Changes moods quickly. (Often)
- 43. Deceives others. (Never)
- 47. Adjusts well to changes in family plans. (Often)
- 52. Says, "I want to die" or "I wish I were dead." (Never)
- 53. Shows interest in others' ideas. (Sometimes)
- 55. Hurts others on purpose. (Never)
- 59. Manipulates others. (Never)
- 60. Is sad. (Often)
- 68. Breaks the rules. (Never)
- 74. Breaks the rules just to see what will happen. (Never)
- 79. Reacts negatively. (Sometimes)
- 87. Quickly joins group activities. (Never)
- 94. Puts others down. (Never)
- 98. Hits other children. (Never)
- 106. Gets back at others. (Never)
- 117. Bullies others. (Never)
- 119. Is irritable. (Often)
- 121. Argues when denied own way. (Sometimes)
- 124. Says, "I want to kill myself." (Never)
- 134. Accepts people who are different from his or her self. (Almost always)
- 137. Offers help to other children. (Often)
- 138. Is overly emotional. (Sometimes)
- 144. Steals. (Never)
- 150. Tells lies about others. (Never)
- 164. Sneaks around. (Never)
- 172. Cannot wait to take turn. (Often)

#### **Functional Impairment**

- 1. Pays attention. (Sometimes)
- 4. Is easily upset. (Sometimes)
- 5. Responds appropriately when asked a question. (Almost always)
- 7. Gets into trouble. (Never)
- 9. Worries. (Sometimes)
- 11. Has a short attention span. (Often)
- 12. Acts confused. (Never)
- 15. Complains about health. (Never)
- 22. Makes healthy food choices. (Often)
- 24. Acts without thinking. (Often)
- 27. Has trouble following regular routines. (Often)
- 33. Accurately takes down messages. (Almost always)
- 34. Cries easily. (Sometimes)
- 38. Worries about things that cannot be changed. (Sometimes)
- 40. Changes moods quickly. (Often)
- 43. Deceives others. (Never)
- 48. Is shy with other children. (Never)
- 56. Tracks down information when needed. (Almost always)
- 61. Answers telephone properly.. (Almost always)
- 64. Has trouble fastening buttons on clothing. (Never)
- 66. Needs to be reminded to brush teeth. (Never)

- 69. Has difficulty explaining rules of games to others. (Sometimes)
- 73. Has poor self-control. (Often)
- 76. Communicates clearly. (Almost always)
- 79. Reacts negatively. (Sometimes)
- 81. Seems out of touch with reality. (Never)
- 85. Has trouble getting information when needed. (Sometimes)
- 87. Quickly joins group activities. (Never)
- 96. Avoids other children. (Never)
- 100. Seems lonely. (Often)
- 111. Has trouble making new friends. (Never)
- 122. Says things that make no sense. (Never)
- 135. Is easily calmed when angry. (Often)
- 137. Offers help to other children. (Often)
- 142. Makes decisions easily. (Often)
- 147. Is easily stressed. (Sometimes)
- 148. Is clear when telling about personal experiences. (Sometimes)
- 149. Organizes chores or other tasks well. (Often)
- 153. Acts in a safe manner. (Almost always)
- 163. Makes friends easily. (Never)
- 165. Is able to describe feelings accurately. (Almost always)
- 168. Is unclear when presenting ideas. (Sometimes)
- 172. Cannot wait to take turn. (Often)
- 174. Congratulates others when good things happen to them. (Often)

### **ITEMS BY SCALE - EXECUTIVE FUNCTIONING INDEX**

#### **Problem Solving Index**

- 16. Plans well. (Sometimes)
- 37. Sets realistic goals. (Often)
- 56. Tracks down information when needed. (Almost always)
- 71. Takes a step-by-step approach to work. (Sometimes)
- 95. Finds ways to solve problems. (Sometimes)
- 120. Gives good suggestions for solving problems. (Sometimes)
- 142. Makes decisions easily. (Often)
- 149. Organizes chores or other tasks well. (Often)

#### **Attentional Control Index**

- 1. Pays attention. (Sometimes)
- 11. Has a short attention span. (Often)
- 28. Listens to directions. (Sometimes)
- 83. Listens carefully. (Never)
- 91. Is easily distracted. (Sometimes)
- 127. Pays attention when being spoken to. (Often)
- 175. Has trouble concentrating. (Often)

#### **Behavioral Control Index**

- 24. Acts without thinking. (Often)
- 42. Interrupts others when they are speaking. (Often)
- 73. Has poor self-control. (Often)
- 121. Argues when denied own way. (Sometimes)
- 159. Interrupts parents when they are talking on the phone. (Often)

166. Acts out of control. (Often)

#### **Emotional Control Index**

- 44. Overreacts to stressful situations. (Sometimes)
- 70. Gets angry easily. (Never)
- 135. Is easily calmed when angry. (Often)
- 138. Is overly emotional. (Sometimes)

#### **Overall Executive Functioning Index**

- 1. Pays attention. (Sometimes)
- 11. Has a short attention span. (Often)
- 16. Plans well. (Sometimes)
- 24. Acts without thinking. (Often)
- 28. Listens to directions. (Sometimes)
- 37. Sets realistic goals. (Often)
- 42. Interrupts others when they are speaking. (Often)
- 44. Overreacts to stressful situations. (Sometimes)
- 56. Tracks down information when needed. (Almost always)
- 70. Gets angry easily. (Never)
- 71. Takes a step-by-step approach to work. (Sometimes)
- 73. Has poor self-control. (Often)
- 83. Listens carefully. (Never)
- 91. Is easily distracted. (Sometimes)
- 95. Finds ways to solve problems. (Sometimes)
- 120. Gives good suggestions for solving problems. (Sometimes)
- 121. Argues when denied own way. (Sometimes)
- 127. Pays attention when being spoken to. (Often)
- 135. Is easily calmed when angry. (Often)
- 138. Is overly emotional. (Sometimes)
- 142. Makes decisions easily. (Often)
- 149. Organizes chores or other tasks well. (Often)
- 159. Interrupts parents when they are talking on the phone. (Often)
- 166. Acts out of control. (Often)
- 175. Has trouble concentrating. (Often)

The Behavior Assessment System for Children, Third Edition (BASC-3) is an integrated system designed to facilitate the differential diagnosis and classification of a variety of emotional and behavioral disorders of children and to aid in the design of treatment plans. This computer-generated report should not be the sole basis for making important diagnostic or treatment decisions.

### **End of Report**

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#### ID: 12345 Sample Examinee

## **ITEM RESPONSES**

1: 2	2: 3	3: 1	4: 2	5: 4	6: 2	7: 1	8: 2	9: 2	10: 1
11: 3	12: 1	13: 1	14: 4	15: 1	16: 2	17: 1	18: 2	19: 1	20: 2
21: 2	22: 3	23: 2	24: 3	25: 2	26: 2	27: 3	28: 2	29: 1	30: 1
31: 2	32: 3	33: 4	34: 2	35: 1	36: 1	37: 3	38: 2	39: 1	40: 3
41: 1	42: 3	43: 1	44: 2	45: 2	46: 3	47: 3	48: 1	49: 1	50: 2
51: 1	52: 1	53: 2	54: 2	55: 1	56: 4	57: 2	58: 1	59: 1	60: 3
61: 4	62: 1	63: 1	64: 1	65: 2	66: 1	67: 2	68: 1	69: 2	70: 1
71: 2	72: 1	73: 3	74: 1	75: 1	76: 4	77: 3	78: 1	79: 2	80: 3
81: 1	82: 1	83: 1	84: 2	85: 2	86: 3	87: 1	88: 1	89: 1	90: 4
91: 2	92: 3	93: 3	94: 1	95: 2	96: 1	97: 3	98: 1	99: 3	100: 3
101: 1	102: 2	103: 3	104: 2	105: 1	106: 1	107: 2	108: 1	109: 3	110: 3
111: 1	112: 2	113: 2	114: 3	115: 1	116: 3	117: 1	118: 1	119: 3	120: 2
121: 2	122: 1	123: 1	124: 1	125: 1	126: 1	127: 3	128: 2	129: 1	130: 3
131: 1	132: 1	133: 2	134: 4	135: 3	136: 1	137: 3	138: 2	139: 1	140: 1
141: 1	142: 3	143: 2	144: 1	145: 1	146: 1	147: 2	148: 2	149: 3	150: 1
151: 3	152: 1	153: 4	154: 2	155: 1	156: 1	157: 1	158: 1	159: 3	160: 2
161: 1	162: 1	163: 1	164: 1	165: 4	166: 3	167: 1	168: 2	169: 3	170: 2
171: 1	172: 3	173: 2	174: 3	175: 3					