

By C. Keith Conners, Ph.D.

# **Conners 3 Comparative Report**

Child's Name/ID: John H.

Gender: Male

Birth Date: March 24, 1997

Normative Option: Gender-specific norms

DSM Scoring Option: DSM-5

Report Options: The following features were included in this report: Percentiles.

The following additional features are available: Standard Error of

Measurement.

	Parent	Self-Report
Child's Name/ID:	John H.	John H.
Administration Date:	Mar 24, 2014	Mar 24, 2014
Age:	17 years	17 years
Grade:	12	12
Rater Name/ID:	Jane H.	
Assessor Name:	K. C.	
Data Entered By:	S. M.	

This Comparative Report is intended for use by qualified assessors only, and is not to be shown or presented to the respondent or any other unqualified individuals.



## **Summary of Results**

## **Response Style Analysis**

Scores on the Validity scales do not indicate a positive, negative, or inconsistent response style for 2 raters (Parent, Self-Report).

#### **Summary of Elevated Scores**

The following section summarizes areas of concern for John H. based on ratings on the Conners 3. Note that areas that are not a concern are not reported in this summary.

#### **Conners 3 Content Scales**

- **Inattention:** The *T*-scores were elevated for 2 raters (Parent = 68, Self-Report = 67).
- **Hyperactivity/Impulsivity:** The *T*-scores were very elevated for 2 raters (Parent = 80, Self-Report = 75).
- **Defiance/Aggression:** The *T*-score was elevated for 1 rater (Parent = 66).
- Peer Relations (Parent form only): The T-score was very elevated for 1 rater (Parent = 85).
- Family Relations (Self-Report form only): The T-score was very elevated for 1 rater (Self-Report = 71).

## **DSM-5 Symptom Scales**

- **ADHD Predominantly Inattentive Presentation:** The Symptom Counts were probably met for 2 raters (Parent, Self-Report). The *T*-score was very elevated for 1 rater (Parent = 70). The *T*-score was elevated for 1 rater (Self-Report = 68).
- **ADHD Predominantly Hyperactive-Impulsive Presentation:** The Symptom Counts were probably met for 2 raters (Parent, Self-Report). The *T*-scores were very elevated for 2 raters (Parent = 86, Self-Report = 73).
- Conduct Disorder: The Symptom Count was probably met for 1 rater (Parent).

## **Impairment**

John H.'s problems seriously affect his functioning in the **Academic** setting:

often (rating = 2), according to 2 raters (Parent, Self-Report).

John H.'s problems seriously affect his functioning in the **Social** setting:

• often (rating = 2), according to 2 raters (Parent, Self-Report).

John H.'s problems seriously affect his functioning in the **Home** setting:

• often (rating = 2), according to 2 raters (Parent, Self-Report).

#### **Conners 3 Index Scores**

According to ratings on the **Conners 3 ADHD Index**, a clinical classification of ADHD is:

indicated for 2 raters (Probability (%): Parent = 71, Self-Report = 78)

According to ratings on the Conners 3 Global Index:

Conners 3GI Emotional Lability: The T-score was elevated for 1 rater (Parent = 65).

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Conners 3GI Total: The T-score was elevated for 1 rater (Parent = 66).



#### Screener Items

According to ratings on the Conners 3, further investigation was suggested/recommended for the following issues:

- Anxiety for 1 rater (Parent).
- Depression for 1 rater (Parent).

#### **Conners 3 Results and IDEA**

Scores suggest possible consideration of IDEA 2004 eligibility in the following areas:

- Autism for 1 rater (Parent).
- Emotional Disturbance for 2 raters (Parent, Self-Report).
- Other Health Impairment for 2 raters (Parent, Self-Report).
- Specific Learning Disability for 2 raters (Parent, Self-Report).

## **Cautionary Remark**

This Summary of Results section only provides information about areas that are a concern. Please refer to the remainder of the Comparative Report for further information regarding areas that are not elevated or could not be scored due to omitted items.



#### Introduction

The Conners 3rd Edition (Conners 3) is an assessment tool used to obtain observations about the youth's behavior from multiple perspectives. This instrument is designed to assess Attention Deficit/Hyperactivity Disorder (ADHD) and its most common co-morbid problems in children and adolescents aged 6 to 18 years old for the parent and teacher reports, and aged 8 to 18 years old for the self-report. When used in combination with other information, results from the Conners 3 can provide valuable information to guide assessment decisions. This report combines the results of up to five raters to provide an overview of the child's behavior from a multi-rater perspective, and highlights potentially important inter-rater differences in scores. Please note that this Comparative report is intended to provide an overview of similarities and differences in scores across raters. For detailed information about any given administration, please refer to the *Conners 3 Assessment reports*.

This computerized report is an interpretive aid and should not be given to clients or used as the sole criterion for clinical diagnosis or intervention. Administrators are cautioned against drawing unsupported interpretations. Combining information from this report with information gathered from other psychometric measures, as well as from interviews and discussions with the child, will give the assessor or service provider a more comprehensive view of the child than might be obtained from any one source.

Note: For all tables and graphs, P = Parent, S = Self-Report.

## **Response Style Analysis**

The following table provides each rater's scores (including the raw score and guideline) for the three Validity scales.

Validity Scale	Raw Score (Guideline)		
	P	S	
Positive	0	0	
Impression	(positive response style not indicated)	(positive response style not indicated)	
Negative	2	0	
Impression	(negative response style not indicated)	(negative response style not indicated)	
Inconsistency		4	
	Differentials ≥ 2 = 0	Differentials ≥ 2 = 0	
	(inconsistent response style not indicated)	(inconsistent response style not indicated)	

## **T-score Guidelines**

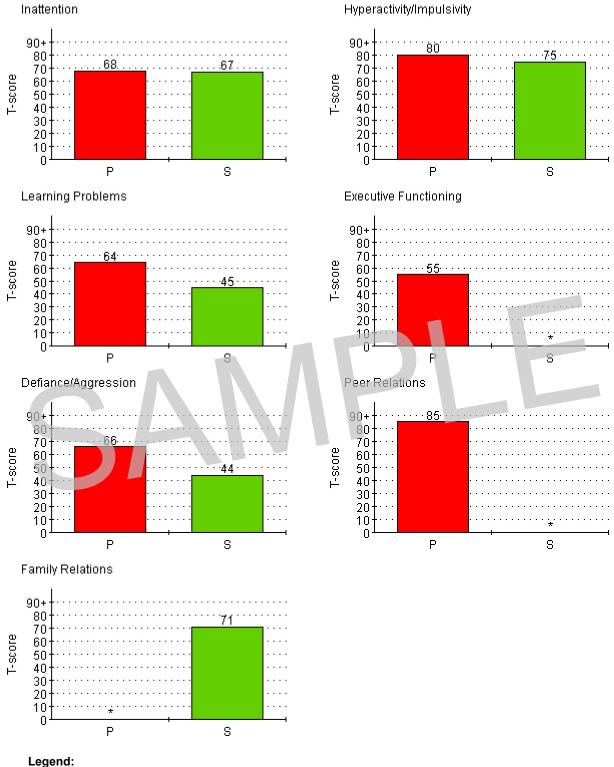
The guidelines in the following table apply to all *T*-scores presented in this report. See the *Conners 3 Manual* for more information.

T-score	Guideline
70+	Very Elevated Score (Many more concerns than are typically reported)
65-69	Elevated Score (More concerns than are typically reported)
60-64	High Average Score (Slightly more concerns than are typically reported)
	Average Score (Typical levels of concern)
< 40	Low Score (Fewer concerns than are typically reported)



## Conners 3 Content Scale *T*-scores: Comparison across Raters

The following graphs display the *T*-score results for each of the Conners 3 Content scales.



\* No comparable scale

**≋MHS** 

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# **Conners 3 Content Scale Detailed Scores: Comparison across Raters**

The following table summarizes the results for each scale, as well as any statistically significant (p < .10) differences in T-scores between pairs of raters. If a pair of ratings is not noted in the "Statistically Significant Differences" column, then the difference between those two raters did not reach statistical significance.

Scale	••	percentile) leline	Statistically Significant Differences
	Р	S	
Inattention	68 (94) Elevated	67 (95) Elevated	No significant difference
Hyperactivity/ Impulsivity	80 (98) Very Elevated	75 (98) Very Elevated	No significant difference
Learning Problems	64 (89) High Average	45 (35) Average	P > S
Executive Functioning	55 (79) Average	-	Comparison not possible
Defiance/ Aggression	66 (90) Elevated	44 (21) Average	P > S
Peer Relations	85 (96) Very Elevated	-	Comparison not possible
Family Relations	-	71 (94) Very Elevated	Comparison not possible

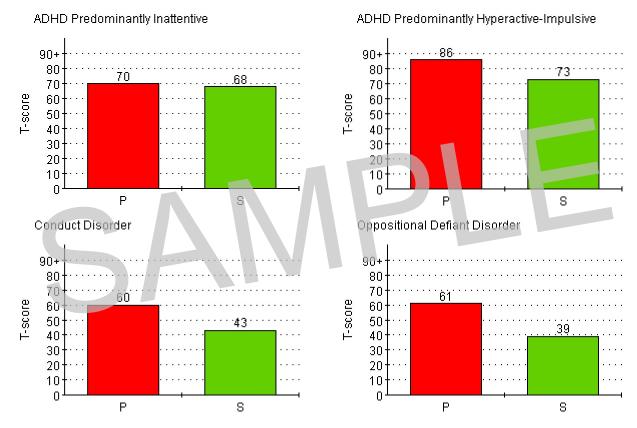


## **DSM-5 Symptom Scales**

This section provides a comparison of DSM-5 Symptom Scales across raters. The Conners 3 provides information relevant to the DSM-5 diagnoses from two different perspectives: absolute (Symptom Count) and relative (*T*-scores). Results of the DSM-5 Symptom Counts can contribute to consideration of whether a particular DSM-5 diagnosis might be appropriate. A *T*-score for each DSM-5 diagnosis facilitates comparison of this individual's symptoms with his or her peers. At times there may be discrepancies between Symptom Count and *T*-score for a given diagnosis. This is to be expected, given that they are based on different metrics (i.e., absolute versus relative). See the *Conners 3 Manual* for information on interpreting discrepancies.

### **T-scores: Comparison across Raters**

The following graphs display the *T*-score results for the DSM-5 Symptom scales.



## **Detailed Scores: Comparison across Raters**

The following table summarizes the results for each DSM-5 Symptom scale, as well as any statistically significant (p < .10) differences in T-scores between pairs of raters. If a pair of ratings is not noted in the "Statistically Significant Differences" column, then the difference between those two raters did not reach statistical significance.

Scale		e (percentile)  uideline  Statistically Signification  Differences	
	Р	S	
ADHD Predominantly Inattentive Presentation	70 (94) Very Elevated	68 (96) Elevated	No significant difference
ADHD Predominantly Hyperactive- Impulsive Presentation	86 (98) Very Elevated	73 (99) Very Elevated	P > S
Conduct Disorder	60 (89) High Average	43 (17) Average	P > S
Oppositional Defiant Disorder	61 (84) High Average	39 (15) Low	P > S



## **DSM-5 Total Symptom Counts: Comparison of Symptom Count Status** across Raters

The following table displays the Symptom Count status as indicated by the Conners 3 Total Symptom Count. A checkmark indicates that the Symptom Count was *probably met*.

Capla	DOM E Symptom Count Doggisements	Symptom Coun	t Probably Met
Scale	DSM-5 Symptom Count Requirements	Р	S
ADHD Predominantly Inattentive Presentation (ADHD In)	At least 5 out of 9 symptoms	<b>√</b>	<b>√</b>
ADHD Predominantly Hyperactive-Impulsive Presentation (ADHD Hyp- Imp)	At least 5 out of 9 symptoms	<b>√</b>	<b>√</b>
ADHD Combined Presentation	Criteria must be met for both ADHD In and ADHD Hyp-Imp	✓	✓
Conduct Disorder <sup>¥</sup>	At least 3 out of 15 symptoms	✓	
Oppositional Defiant Disorder	At least 4 out of 8 symptoms		

<sup>\*</sup>The Self-Report form does not assess Criterion A7 (forced sexual activity) due to the sensitive nature of this criterion.

## **DSM-5 Total Symptom Counts: Count Comparison across Raters**

The following table displays the DSM-5 Symptom Counts as indicated by the Conners 3. **Bolded text** indicates that the Symptom Count requirements were *probably met*.

Scale	Symptom Count as in	ndicated by Conners 3
	P	S
ADHD Predominantly Inattentive Presentation	6	6
ADHD Predominantly Hyperactive-Impulsive Presentation	6	7
ADHD Combined Presentation	ADHD In: 6 ADHD Hyp-Imp: 6	ADHD In: 6 ADHD Hyp-Imp: 7
Conduct Disorder¥	3	1
Oppositional Defiant Disorder	2	0

<sup>\*</sup>The Self-Report form does not assess Criterion A7 (forced sexual activity) due to the sensitive nature of this criterion.



## **DSM-5 Symptom Tables: Comparison across Raters**

The following tables display the status of specific DSM-5 criteria as indicated by the Conners 3.

#### **DSM-5 ADHD Predominantly Inattentive Presentation**

DSM-5 Symptoms: Criterion A	lte	Item Criterion		n Status
	Р	S	Р	S
A1a.	47	31 or 39	Indicated	Indicated
A1b.	95	63	Indicated	Not Indicated
A1c.	35	42	Indicated	Indicated
A1d.	68 and 79	61 and 17	Not Indicated	Not Indicated
A1e.	84	21	Not Indicated	Indicated
A1f.	28	51	May be Indicated	Not Indicated
A1g.	97	5	Indicated	Indicated
A1h.	101	77	Not Indicated	May be Indicated
A1i.	2	32	Indicated	May be Indicated

#### **DSM-5 ADHD Predominantly Hyperactive-Impulsive Presentation**

DSM-5	Ite	em	Criterion	Status
Symptoms: Criterion A	Р	S	P	S
Hyperactivity				
A2a.	98	60	Indicated	May be Indicated
A2b.	93	64	Indicated	Not Indicated
A2c.	69 or 99	20 or 7	Not Indicated	Indicated
A2d.	71	84	Not Indicated	Indicated
A2e.	54 or 45	66 or 55	May be Indicated	May be Indicated
A2f.	3	34	Indicated	Not Indicated
Impulsivity		1		
A2g.	43	9	Indicated	Indicated
A2h.	61	27	Not Indicated	Indicated
A2i.	104	6	Indicated	Indicated

#### **DSM-5 ADHD Combined Presentation**

An ADHD Combined Presentation diagnosis requires the examination of symptoms for ADHD Predominantly Inattentive Presentation and for ADHD Predominantly Hyperactive-Impulsive Presentation. See the ADHD Predominantly Inattentive Presentation and ADHD Predominantly Hyperactive-Impulsive Presentation symptom tables above. Please also see the DSM-5 or the *Conners 3 Manual and DSM-5 Update* for additional guidance.

#### **DSM-5 Conduct Disorder**

DSM-5	Ite	m	Criterion	Status
Symptoms: P		S	P S	
Aggression to P	People and Anin	nals		
A1.	16	25	Not Indicated	Not Indicated
A2.	30	38	May be Indicated	Not Indicated
A3.	27	59	Not Indicated	Not Indicated
A4.	39	86	Not Indicated	Not Indicated
A5.	41	47	Not Indicated	Not Indicated
A6.	96	13	Not Indicated	Not Indicated
A7.	11	-	Not Indicated	-
Destruction of F	Property	!	'	
A8.	78	72	Not Indicated	Not Indicated
A9.	65	82	Not Indicated	Not Indicated
Deceitfulness of	r Theft	-	'	
A10.	89	78	Not Indicated	Not Indicated
A11.	56	16	Not Indicated	Not Indicated
A12.	58	52	Not Indicated	Not Indicated
Serious Violatio	ns of Rules			
A13.	91	91	May be Indicated	Not Indicated
A14.	76	8	Not Indicated	Not Indicated
A15.	6	33	May be Indicated	May be Indicated

The Self-Report form does not assess Criterion A7 (forced sexual activity) due to the sensitive nature of this criterion.

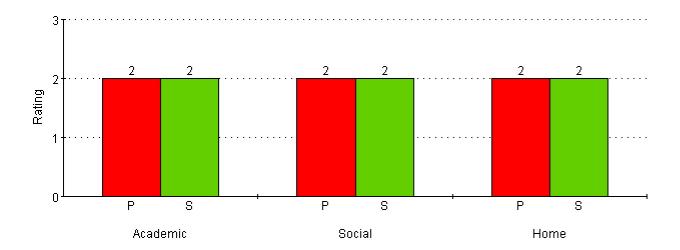
## **DSM-5 Oppositional Defiant Disorder**

DSM-5 Symptoms:		Criterion Status	
P	S	Р	S
Mood			
14	67	Not Indicated	Not Indicated
73	74	Not Indicated	Not Indicated
48	87	May be Indicated	Not Indicated
e/Defiant Behavio	r		
102	24	Not Indicated	Not Indicated
94	1R	Not Indicated	Not Indicated
59	3	Not Indicated	Not Indicated
21	62	Not Indicated	Not Indicated
s	1		
57	94	May be Indicated	Not Indicated
	P 2 Mood 14 73 48 2 P/Defiant Behavior 102 94 59 21	14 67 73 74 48 87 e/Defiant Behavior 102 24 94 1R 59 3 21 62 s	P         S         P           a Mood         14         67         Not Indicated           73         74         Not Indicated           48         87         May be Indicated           ac/Defiant Behavior         102         24         Not Indicated           94         1R         Not Indicated           59         3         Not Indicated           21         62         Not Indicated

R = This item is reverse scored for score calculations.

## **Impairment**

Each rater's report of John H.'s level of impairment in academic, social, and home settings is presented below.



**Rating:** 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

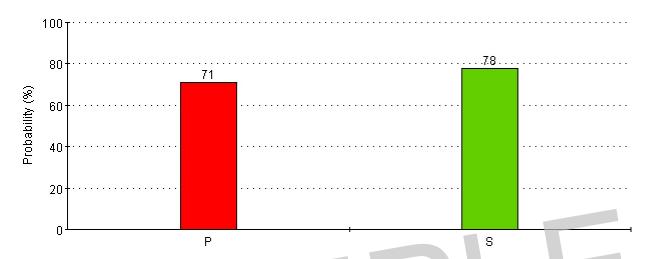


## **Conners 3 Index Scores**

The following section describes the results for the two index scores on the Conners 3.

## **Conners 3 ADHD Index**

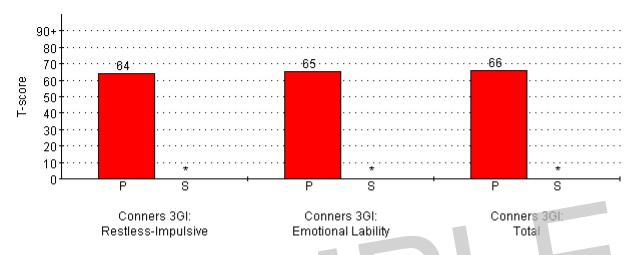
The following section summarizes each rater's ratings of John H. on the Conners 3 ADHD Index.



	P	S
Probability (%)	71	78
Guideline	A classification of ADHD is indicated	A classification of ADHD is indicated

#### **Conners 3 Global Index**

The following section summarizes each rater's ratings of John H. on the Conners 3 Global Index. High scores on the Conners 3Gl may describe a youth who is moody and emotional, or restless, impulsive or inattentive. The graph displays T-scores; the table displays T-scores and summarizes the results for the Conners 3 Global Index, as well as any statistically significant (p < .10) differences in T-scores between raters. If a pair of ratings is not noted in the "Statistically Significant Differences" column, then the difference between those two raters did not reach statistical significance.



<sup>\*</sup> No comparable scale

Scale	T-score (p Guide	Statistically Significant Differences	
	Р	S	
Conners 3GI: Restless- Impulsive	64 (92) High Average		Comparison not possible
Conners 3GI: Emotional Lability	65 (90) Elevated	-	Comparison not possible
Conners 3GI: Total	66 (95) Elevated	-	Comparison not possible

## **Anxiety Screener Items**

The following table displays the results from each rater's ratings of John H.'s behavior with regards to specific items that are related to generalized anxiety.

#### Guideline based on the ratings to these items:

Parent: Further investigation was suggested/recommended.

**Self-Report:** The ratings did not indicate a need for further investigation.

Item Content	Ite	em	Rating			
item content	Р	S	Р	S		
Worries	4	90	1	0		
Trouble controlling worries	20	46	1	0		
Nervous or jumpy	70	2	1	0		
Irritable when anxious	100	29	1	0		

Rating: 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

## **Depression Screener Items**

The following table displays the results from each rater's ratings of John H.'s behavior with regards to specific items that are related to depression.

#### Guideline based on the ratings to these items:

Parent: Further investigation was suggested/recommended.

Self-Report: The ratings did not indicate a need for further investigation.

Item Content	lte	em	Rating			
item content	Р	S	Р	S		
Worthlessness	17	36	1	0		
Tired; low energy	66	80	1	0		
Loss of interest or pleasure	82	44	1	0		
Sad, gloomy, or irritable	103	68	1	0		

Rating: 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

## **Severe Conduct Critical Items**

The following table displays each rater's observations of John H. with regard to the Severe Conduct Critical Items.

Item Content	Ite	em	Rating			
item content	Р	S	Р	S		
Uses a weapon	27	59	0	0		
Cruel to animals	41	47	0	0		
Confrontational stealing	96	13	0	0		
Forced sex	11	-	0	-		
Fire setting	78	72	0	0		
Breaking and entering	89	78	0	0		
Trouble with police	-	22	-	0		

**Rating:** 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

Note(s): None of the responses suggest the need for immediate follow-up.

## **Additional Questions**

The following section displays the additional comments made by each rater about John H...

Any concerns about child:

- Parent: He is not performing to his potential.
- Self-Report: I don't know how to make my parents happy with me.

Strengths or skills about child:

- Parent: He is very creative, and energetic.
- Self-Report: I have a lot of energy and like to try new things.

## **Conners 3 Results and IDEA**

Checkmarks under "Follow-up Recommended" in the following table denote areas of the Conners 3 that were indicated or endorsed, suggesting possible consideration of IDEA 2004 eligibility in related areas.

Content Areas	Follow-up R	ecommended	Possible IDEA Eligibility Category		
	Р	S			
Conners 3 Content Scales		•	•		
Inattention	✓	✓	ED, LD, OHI		
Hyperactivity/Impulsivity	✓	✓	ED, OHI		
Learning Problems			LD		
Executive Functioning		-	LD, OHI		
Defiance/Aggression	✓		ED		
Peer Relations	✓	-	Autism, ED		
Family Relations	-	✓	ED		
DSM-5 Symptom Scales		•			
ADHD Predominantly Inattentive Presentation	✓	✓	ED, LD, OHI		
ADHD Predominantly Hyperactive- Impulsive Presentation	✓	✓	ED, OHI		
ADHD Combined Presentation	✓	✓	ED, LD, OHI		
Conduct Disorder	✓		ED		
Oppositional Defiant Disorder			ED		
Screener Items					
Anxiety	~		ED		
Depression	V		ED		
Severe Conduct Critical Items					
Severe Conduct			ED		

ED = Emotional Disturbance; LD = Specific Learning Disability; OHI = Other Health Impairment.

## **Item Responses**

The following response values were entered for the items on the Conners 3.

#### **Parent Items**

Item	Parent Rating										
1.	1	19.	1	37.	1	55.	1	73.	1	91.	1
2.	2	20.	1	38.	1	56.	1	74.	0	92.	1
3.	2	21.	1	39.	0	57.	1	75.	1	93.	2
4.	1	22.	1	40.	1	58.	0	76.	0	94.	1
5.	1	23.	1	41.	0	59.	0	77.	1	95.	2
6.	1	24.	1	42.	1	60.	1	78.	0	96.	0
7.	1	25.	1	43.	3	61.	1	79.	0	97.	2
8.	1	26.	1	44.	1	62.	1	80.	1	98.	2
9.	1	27.	0	45.	1	63.	1	81.	0	99.	0
10.	1	28.	2	46.	1	64.	1	82.	1	100.	1
11.	0	29.	1	47.	2	65.	0	83.	1	101.	1
12.	1	30.	1	48.	1	66.	1	84.	1	102.	1
13.	1	31.	1	49.	1	67.	1	85.	1	103.	1
14.	1	32.	1	50.	1	68.	1	86.	1	104.	2
15.	1	33.	1	51.	1	69.	0	87.	1	105.	1
16.	0	34.	1	52.	1	70.	1	88.	1	106.	2
17.	1	35.	2	53.	1	71.	1	89.	0	107.	2
18.	1	36.	1	54.	1	72.	1	90.	1	108.	2

Rating: 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

## **Self-Report Items**

Item	Self-Report Rating										
1.	2	18.	1	35.	1	52.	0	69.	2	86.	0
2.	0	19.	2	36.	0	53.	1	70.	0	87.	0
3.	0	20.	0	37.	1	54.	0	71.	1	88.	3
4.	2	21.	3	38.	0	55.	2	72.	0	89.	0
5.	2	22.	0	39.	2	56.	0	73.	2	90.	0
6.	2	23.	3	40.	3	57.	2	74.	0	91.	0
7.	3	24.	1	41.	3	58.	0	75.	0	92.	0
8.	0	25.	0	42.	2	59.	0	76.	1	93.	2
9.	3	26.	3	43.	2	60.	2	77.	2	94.	0
10.	2	27.	2	44.	0	61.	1	78.	0	95.	2
11.	2	28.	1	45.	0	62.	0	79.	2	96.	2
12.	2	29.	0	46.	0	63.	1	80.	0	97.	2
13.	0	30.	2	47.	0	64.	1	81.	2		
14.	2	31.	2	48.	0	65.	0	82.	0		
15.	1	32.	2	49.	1	66.	1	83.	2		
16.	0	33.	1	50.	3	67.	0	84.	2		
17.	1	34.	0	51.	1	68.	0	85.	2		

Rating: 0 = Not true at all (Never, Seldom); 1 = Just a little true (Occasionally); 2 = Pretty much true (Often, Quite a bit); 3 = Very much true (Very often, Very frequently); ? = Omitted item.

Date printed: March 24, 2014

**End of Report** 

