



SELF-REPORT

Single-Rater Report

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CLIENT

Name/ID: S101
Date of Birth: May 1, 1978
Age: 45
Gender:

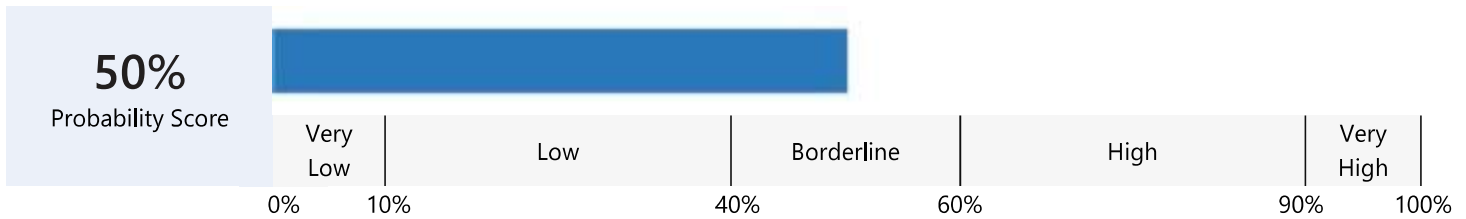
ADMINISTRATION DETAILS

Administration Date: May 1, 2023
Assessment Language: English
Normative Age Group: 40 to 49 years

This computerized report is an interpretive aid intended for use by qualified professionals only. It should not be used as the sole criterion for clinical diagnosis or intervention. CAARS 2—ADHD Index results should be combined with information gathered from other psychometric measures, interviews, observations, and review of available records. This report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Responses to specific items should be reviewed to ensure that these typical interpretations apply to the individual being described. **Parts of this report contain copyrighted material, including test items. If it is necessary to provide a copy of this report to anyone other than the examiner, sections containing copyrighted material must be removed.**

OVERVIEW

The statistically-derived CAARS 2–ADHD Index is composed of the 12 items that best differentiate individuals diagnosed with ADHD from those in the general population. It is reported as a probability score along a continuum ranging from 1% to 99% and contributes to diagnostic judgments by indicating the probability that a given score came from an individual with ADHD.



	Raw Score	Probability Score	Guideline
CAARS 2–ADHD Index	17	50%	Borderline

The following table summarizes how the CAARS 2–ADHD Index probability score ranges align with interpretive guidelines. Please refer to the CAARS 2 Manual for more information about interpretation and the development of this score.

Probability Score	Guideline	Interpretation
90% to 99%	Very High	Scores in this range have very high similarities to scores from individuals who have ADHD and are very dissimilar to scores from individuals in the general population.
60% to 89%	High	Scores in this range have high similarity to scores from individuals who have ADHD and are dissimilar to scores from individuals in the general population.
40% to 59%	Borderline	Scores in this range do not have clear similarities to one group over the other (i.e., individuals who have ADHD versus individuals in the general population).
10% to 39%	Low	Scores in this range have low similarity to scores from individuals who have ADHD and are more similar to scores from individuals in the general population.
1% to 9%	Very Low	Scores in this range have very low similarity to scores from individuals who have ADHD and are much more similar to scores from individuals in the general population.

ITEM RESPONSES

Item #	Rating	Item #	Rating	Item #	Rating
1.	1	5.	1	9.	1
2.	0	6.	1	10.	3
3.	2	7.	3	11.	2
4.	1	8.	2	12.	0

Response Key

- 0 = Not true at all; Never/Rarely
- 1 = Just a little true; Occasionally
- 2 = Pretty much true; Often/Quite a bit
- 3 = Completely true; Very often/Always
- ? = Omitted