



## Pediatric Symptom Checklist-17 (PSC-17)

### Instructions:

Please indicate how often your child has had the following experiences over the two weeks.

		Never	Sometimes	Often
1	Feel sad.	0	1	2
2	Feel hopeless.	0	1	2
3	Feel down on him/herself.	0	1	2
4	Worry a lot.	0	1	2
5	Seem to be having less fun.	0	1	2
6	Fidget, is unable to sit still.	0	1	2
7	Daydream too much.	0	1	2
8	Distract easily.	0	1	2
9	Have trouble concentrating.	0	1	2
10	Act as if driven by a motor.	0	1	2
11	Fight with other children.	0	1	2
12	Not listen to rules.	0	1	2
13	Not understand other people's feelings.	0	1	2
14	Tease others.	0	1	2
15	Blame others for his/her troubles.	0	1	2
16	Refuse to share.	0	1	2
17	Take things that do not belong to him her.	0	1	2



NovoPsych

18 Your name:

19 Your relationship to the child:

### Developer Reference:

Gardner, W., Murphy, M., Childs, G., Kelleher, K., & Sturner, R. (1999). The PSC-17: a brief Pediatric Symptom Checklist with psychosocial problem subscales. A report from PROS and ASPN. *Ambulatory Child Health*, 5(3), 225–236.

[Administer Now](#)