



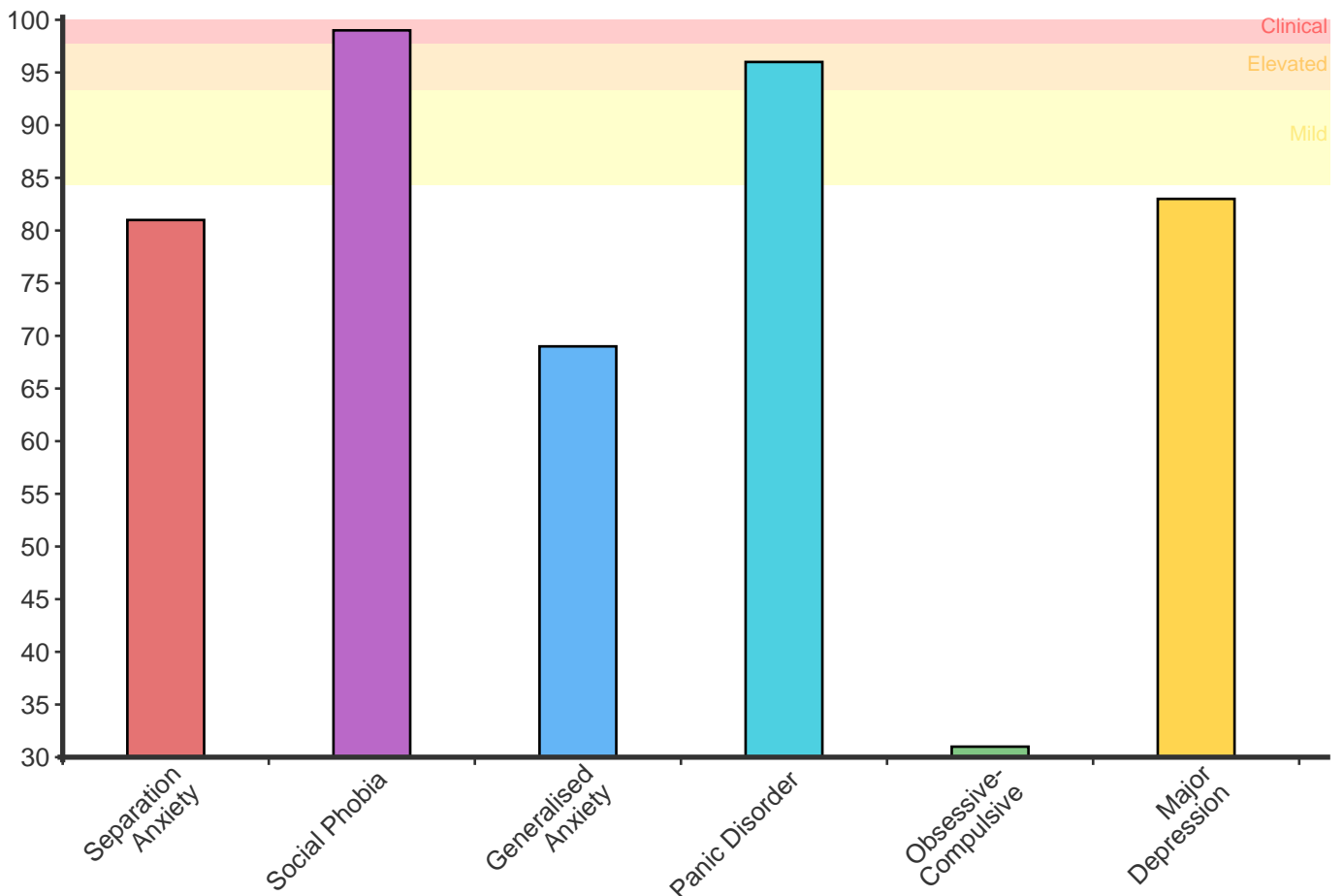
## Revised Child Anxiety and Depression Scale - Child version (RCADS-Child)

|                            |                  |                          |             |
|----------------------------|------------------|--------------------------|-------------|
| <i>Client Name</i>         | Generic Child    | <i>Date administered</i> | 25 Jun 2024 |
| <i>Date of birth (age)</i> | 1 Jan 2013 (11)  | <i>Time taken</i>        | 1 min 6s    |
| <i>Assessor</i>            | Dr David Hegarty |                          |             |

### Results

|   | Raw Score | Normative Percentile | Descriptor |
|---|-----------|----------------------|------------|
| Total Internalising Scale Score (Range 0-141) | 68        | 87                   | Mild       |
| Total Anxiety Scale Score (Range 0-111)       | 55        | 87                   | Mild       |
| Separation Anxiety (Range 0-21)               | 8         | 81                   | Normal     |
| Social Phobia (Range 0-27)                    | 22        | 99                   | Clinical   |
| Generalised Anxiety (Range 0-18)              | 8         | 69                   | Normal     |
| Panic Disorder (Range 0-27)                   | 14        | 96                   | Elevated   |
| Obsessive-Compulsive (Range 0-18)             | 3         | 31                   | Normal     |
| Major Depression (Range 0-30)                 | 13        | 83                   | Normal     |

### Percentiles for Subscales





|                    |               |
|--------------------|---------------|
| <b>Client Name</b> | Generic Child |
|--------------------|---------------|

## Interpretation

The norms used to calculate percentiles and descriptors were for children between 8 and 12 years of age.

Based upon these RCADS scores, this client is in the clinical range for Social Phobia. Therefore, the client is experiencing significant symptoms in this area and requires treatment. Additionally, the client is in the elevated range for Panic Disorder. The client is in the normal range and is not experiencing significant symptoms for Separation Anxiety, Generalized Anxiety, Obsessive-Compulsive and Major Depression.

## Scoring and Interpretation Information

For comprehensive information on the RCADS-Child, [see here](#).

The RCADS-Child yields a Total Internalising Scale (sum of all 6 subscales) and a Total Anxiety Scale (sum of 5 anxiety subscales) to provide an overall indication of symptom severity. The RCADS provides raw scores for the six subscales that are converted to percentiles based on the child's age group (8-12 or 13-18 years) from the Australian normative data. A percentile of 50 reflects the average symptom level relative to same-aged peers, while increasingly higher percentiles indicate more severe symptoms (e.g. > 93.31st percentile signifies elevated symptoms).

A descriptor is provided based upon the following criteria:

- Normal = 93.31st percentile and below
- Elevated = between the 93.32nd and 97.72nd percentile
- Clinical = 97.73rd percentile and above

The six subscales assessed by the RCADS-Child are:

1. Separation Anxiety Disorder (items 5, 9, 17, 18, 33, 45, 46): Assesses excessive fear or anxiety concerning separation from attachment figures.
2. Social Phobia (items 4, 7, 8, 12, 20, 30, 32, 38, 43): Measures fear of social situations and potential negative evaluation from others.
3. Generalised Anxiety Disorder (items 1, 13, 22, 27, 35, 37): Evaluates excessive anxiety and worry across multiple situations.
4. Panic Disorder (items 3, 14, 24, 26, 28, 34, 36, 39, 41): Assesses abrupt surge of intense fear or discomfort accompanied by somatic and cognitive symptoms.
5. Obsessive-Compulsive Disorder (items 10, 16, 23, 31, 42, 44): Measures presence of obsessions (recurrent, intrusive thoughts) and compulsions (repetitive behaviours aimed at reducing anxiety).
6. Major Depressive Disorder (items 2, 6, 11, 15, 19, 21, 25, 29, 40, 47): Assesses symptoms of depression such as low mood, anhedonia, worthlessness, and fatigue.

The RCADS subscales are best conceived as dimensional symptom clusters rather than diagnostic categories. Higher scores suggest greater symptom severity and clinical risk and should be integrated with clinical judgement to guide diagnostic formulation and treatment planning.

Plots demonstrating the subscale percentiles are presented upon first administration. Longitudinal plots are displayed for both the subscale percentiles and the Total Internalising percentile upon multiple administrations to enable tracking of symptoms over time.



**Client Name** | Generic Child

## Client Responses

|    |   | Never | Sometimes | Often | Always |
|----|---|-------|-----------|-------|--------|
| 1  | I worry about things  | 0     | 1         | 2     | 3      |
| 2  | I feel sad or empty   | 0     | 1         | 2     | 3      |
| 3  | When I have a problem, I get a funny feeling in my stomach  | 0     | 1         | 2     | 3      |
| 4  | I worry when I think I have done poorly at something  | 0     | 1         | 2     | 3      |
| 5  | I would feel afraid of being on my own at home  | 0     | 1         | 2     | 3      |
| 6  | Nothing is much fun anymore   | 0     | 1         | 2     | 3      |
| 7  | I feel scared when I have to take a test  | 0     | 1         | 2     | 3      |
| 8  | I feel worried when I think someone is angry with me  | 0     | 1         | 2     | 3      |
| 9  | I worry about being away from my parents  | 0     | 1         | 2     | 3      |
| 10 | I get bothered by bad or silly thoughts or pictures in my mind  | 0     | 1         | 2     | 3      |
| 11 | I have trouble sleeping   | 0     | 1         | 2     | 3      |
| 12 | I worry that I will do badly at my school work  | 0     | 1         | 2     | 3      |
| 13 | I worry that something awful will happen to someone in my family                                      | 0     | 1         | 2     | 3      |
| 14 | I suddenly feel as if I can't breathe when there is no reason for this                                | 0     | 1         | 2     | 3      |
| 15 | I have problems with my appetite  | 0     | 1         | 2     | 3      |
| 16 | I have to keep checking that I have done things right (like the switch is off, or the door is locked) | 0     | 1         | 2     | 3      |
| 17 | I feel scared if I have to sleep on my own  | 0     | 1         | 2     | 3      |
| 18 | I have trouble going to school in the mornings because I feel nervous or afraid                       | 0     | 1         | 2     | 3      |
| 19 | I have no energy for things   | 0     | 1         | 2     | 3      |



**Client Name** | Generic Child

### Client Responses (cont.)

|    |   | Never | Sometimes | Often | Always |
|----|---|-------|-----------|-------|--------|
| 20 | I worry I might look foolish  | 0     | 1         | 2     | 3      |
| 21 | I am tired a lot  | 0     | 1         | 2     | 3      |
| 22 | I worry that bad things will happen to me   | 0     | 1         | 2     | 3      |
| 23 | I can't seem to get bad or silly thoughts out of my head  | 0     | 1         | 2     | 3      |
| 24 | When I have a problem, my heart beats really fast   | 0     | 1         | 2     | 3      |
| 25 | I cannot think clearly  | 0     | 1         | 2     | 3      |
| 26 | I suddenly start to tremble or shake when there is no reason for this                               | 0     | 1         | 2     | 3      |
| 27 | I worry that something bad will happen to me  | 0     | 1         | 2     | 3      |
| 28 | When I have a problem, I feel shaky   | 0     | 1         | 2     | 3      |
| 29 | I feel worthless  | 0     | 1         | 2     | 3      |
| 30 | I worry about making mistakes   | 0     | 1         | 2     | 3      |
| 31 | I have to think of special thoughts (like numbers or words) to stop bad things from happening       | 0     | 1         | 2     | 3      |
| 32 | I worry what other people think of me   | 0     | 1         | 2     | 3      |
| 33 | I am afraid of being in crowded places (like shopping centers, the movies, buses, busy playgrounds) | 0     | 1         | 2     | 3      |
| 34 | All of a sudden I feel really scared for no reason at all   | 0     | 1         | 2     | 3      |
| 35 | I worry about what is going to happen   | 0     | 1         | 2     | 3      |
| 36 | I suddenly become dizzy or faint when there is no reason for this                                   | 0     | 1         | 2     | 3      |
| 37 | I think about death   | 0     | 1         | 2     | 3      |
| 38 | I feel afraid if I have to talk in front of my class  | 0     | 1         | 2     | 3      |



**Client Name** | Generic Child

### Client Responses (cont.)

|    |   | Never | Sometimes | Often | Always |
|----|---|-------|-----------|-------|--------|
| 39 | My heart suddenly starts to beat too quickly for no reason  | 0     | 1         | 2     | 3      |
| 40 | I feel like I don't want to move  | 0     | 1         | 2     | 3      |
| 41 | I worry that I will suddenly get a scared feeling when there is nothing to be afraid of                             | 0     | 1         | 2     | 3      |
| 42 | I have to do some things over and over again (like washing my hands, cleaning or putting things in a certain order) | 0     | 1         | 2     | 3      |
| 43 | I feel afraid that I will make a fool of myself in front of people  | 0     | 1         | 2     | 3      |
| 44 | I have to do some things in just the right way to stop bad things from happening                                    | 0     | 1         | 2     | 3      |
| 45 | I worry when I go to bed at night   | 0     | 1         | 2     | 3      |
| 46 | I would feel scared if I had to stay away from home overnight   | 0     | 1         | 2     | 3      |
| 47 | I feel restless   | 0     | 1         | 2     | 3      |