



Unifour Medical Commons

240 18<sup>th</sup> Street Circle S.E.

Hickory, NC 28602

Phone: (828) 322-2550 Fax: (828) 322-7748

**Dear Parent/Guardian:**

**Re: ADHD Forms**

This packet of information contains several items that are essential to the process of evaluating your child for Attention Deficit/Hyperactivity Disorder. We ask that a parent/guardian and the child's teacher complete a set of behavioral rating scales, which are included.

Please take the time to complete each item as thoroughly as possible. If you do not know the answer to a question, please write, "Do Not Know", so that we can be sure the item was not simply overlooked.

In addition, we ask that you give the teacher packet to your child's teacher to complete. The teacher who spends the most time with your child should be the one to complete these forms.

We ask that you complete the forms as soon as possible, as we are unable to begin an evaluation without both sets of forms being completed.

Thank you for your assistance and cooperation in the completion of these forms. If you have any questions regarding the enclosed materials, or if you would like additional information, please do not hesitate to contact us.

Sincerely,

*Catawba Pediatric Physicians*

Catawba Pediatric Associates, P.A.

