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nichq vanderbilt assessment scale parent informant page 3 of 9 section 6 instructions for completing this form when completing this form type or print using dark ink enter dates as month day year mm dd yyyy

department of the air force af patient health questionnaire 9 phq 9 over the last 2 weeks how often have you been bothered by any of the following problems use to indicate your answer not at all several *adult adhd self report scale asrs v1 1 symptom* vamc slums examination questions about this assessment tool e mail aging slu edu name age is the patient alert

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