

**WAKE FOREST PEDIATRIC ASSOCIATES, PLLC
WFPA, PLLC KNIGHTDALE PEDIATRIC OFFICE
ADHD QUESTIONNAIRE**

Patient Name: _____ **Chart #:** _____ **Date:** _____

Please answer the following questions:

PATIENT HISTORY

1. Does your child have any history of fainting or dizziness (particularly with exercise)? **Yes / No**
2. Does your child have a history of seizures? **Yes / No**
3. Has your child ever had Rheumatic fever? **Yes / No**
4. Has your child ever had chest pain or shortness of breath with exercise? **Yes / No**
5. Has your child ever had any unexplained, noticeable change in exercise tolerance? **Yes / No**
6. Has your child ever had heart palpitations, increased heart rate or extra / skipped heart beats? **Yes / No**
7. Does your child have a history of high blood pressure? **Yes / No**
8. Does your child have a history of a heart murmur (other than innocent or functional murmur) or any history of other heart problems? **Yes / No**
9. Has your child ever had a viral illness associated with chest pains or palpitations? **Yes / No**
10. Please list all current medications your child is taking (over the counter, prescriptions or any health supplements). _____

FAMILY HISTORY

1. Do you have a family history of a sudden or unexplained death in someone young? **Yes / No**
2. Do you have a family member that had suffered a sudden cardiac death less than 35 years of age. **Yes / No**
3. Any family members who have had a sudden death during exercise? **Yes / No**
4. Any family history of cardiac arrhythmias? **Yes / No**
5. Any family history of cardiomyopathy, hypertrophic cardiomyopathy, including dilated cardiomyopathy and right ventricular cardiomyopathy (right ventricular dysplasia)? **Yes / No**
6. Any family history of Marfan syndrome? **Yes / No**
7. Any events requiring resuscitation in young family members less than 35 years of age, including fainting requiring resuscitation? **Yes / No**
8. Any family history of Brugada syndrome, short-QT syndrome, or long-QT syndrome? **Yes / No**
9. Any family history of Wolff-Parkinson-White syndrome or similar abnormal rhythm conditions? **Yes / No**