ADHD Evaluation Report Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · July 2026

An ADHD evaluation report integrates the referral question, history, observations, and multi-informant rating scales into a DSM-5-TR criteria mapping, a differential, a diagnosis, and recommendations. Prescribers, schools, payers, and stimulant-authority reviewers act on what it establishes.

Identifying info & referral question who is asking, for what decision
Do: record client, DOB, evaluation dates, evaluator credentials, referrer, and the question in one sentence.
Pitfall: no referral question means no medical necessity; school-accommodation-only purposes read as an educational service.

Sources of information & consent every criterion needs a source
Do: list interviews, informants, rating scales with versions, tests, records reviewed, consent, and telehealth modality.
Pitfall: a missing teacher form nobody mentions; say what never came back and what covered for it.

History & onset evidence before age 12, with a named source
Do: cover developmental, medical, psychiatric, family, school or work history, sleep, and substances; anchor onset in records.
Pitfall: "symptoms since childhood" with no report card, parent account, or record behind it.

Behavioral observations one line protects every score
Do: describe attention, activity, effort, and rapport, then state whether results are interpretable.
Pitfall: good one-on-one attention left unexplained; office demands are not classroom demands.

Rating scales, by informant two informants, two settings
Do: report each instrument with version, informant, and setting; then the pattern of agreement and divergence.
Pitfall: one informant, one setting; a parent-only profile leaves the second setting unevidenced.

Cognitive & achievement context context, not a required test
Do: report any cognitive or achievement results as rule-out context and justify the battery you gave.
Pitfall: implying IQ or computer testing was required; no guideline in the US, Canada, or Australia requires one.

Criteria mapping & differential the engine of the report
Do: map symptom counts by informant and setting, onset, impairment; rule out sleep, anxiety, depression, learning, substances.
Pitfall: scores treated as the verdict; a report that jumps from T-scores to diagnosis fails records review.

Diagnosis & formulation state it, code it, close it
Do: give presentation, severity, and the ICD-10-CM code; document a negative finding just as clearly.
Pitfall: "consistent with possible ADHD" hedges that neither support treatment nor close the question.

Recommendations, feedback & signature the audit-visible close
Do: rank specific recommendations, document the feedback session and releases, record testing time, sign with credentials.
Pitfall: a psychologist's report that reads as a prescription; the medication decision belongs to the prescriber.

Before you sign

- [ ] Referral question stated and answered
- [ ] Two informants and two settings documented
- [ ] Onset evidenced with a named source
- [ ] Scores mapped to criteria, not just reported
- [ ] Differential and rule-outs written down
- [ ] Purpose and medical necessity clear
- [ ] Time recorded if testing codes billed; signed

Drafting with AI

Capture 30 seconds of bullets after the feedback session: informant scores by setting, onset evidence, alternatives ruled out, diagnosis, recommendations.

> *"Draft an ADHD evaluation report from these bullets, 9-year-old referred by her pediatrician, Conners 4 parent and teacher inattention elevations, predominantly inattentive presentation, recommending school supports and a medication discussion: …"*

Never paste client-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

3 to 10 pages	2 to 5 hrs by hand	2 settings minimum	Prescriber · school · payer
typical length	clinical team estimate	criteria evidence	who reads it

Full guide and sample report:
bastiongpt.com/template/adhd-evaluation-report

BastionGPT drafts the report from your interview bullets. Free 7-day trial.

ADHD Evaluation Report Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements.

Client (initials): | DOB / age: | Evaluation date(s): | Report date:

Evaluator / credentials: | Referred by + question: | Modality:

Referral question
Who is asking, and what decision the answer feeds; medical purpose distinct from any accommodation request

Sources of information & consent
Interviews and dates; informants; rating scales with version, informant, setting; tests; records reviewed; consent obtained from

History
Developmental, medical, psychiatric, family, school/work; sleep, substances, prior evaluations; evidence of symptoms before age 12 with source

Behavioral observations / validity statement
Attention, activity, effort, rapport across sessions; whether results are interpretable and why

Rating-scale results, by informant and setting
Instrument / version / informant / setting / scores as the manual scales them; agreement and divergence pattern

Cognitive / achievement context (if tested)
Results as rule-out context; battery justification; no cognitive profile diagnoses ADHD

DSM-5-TR criteria mapping & differential
Inattention ____ of 9; hyperactivity-impulsivity ____ of 9; settings with impairment; onset; alternatives considered and ruled out

Diagnosis & formulation
Presentation, severity, ICD-10-CM code; conditions ruled out; formulation connecting history, data, impairment

Recommendations, feedback & follow-up
Each tied to a finding; feedback session; report shared with (consent); re-evaluation plan

Testing time (if billed): | Signature / credentials: | Date signed: