# ASRS Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · August 2026 · Reproduces no scale text, grid, or item content

**The ASRS v1.1** is a six-question adult ADHD screener (free to use; the 18-item checklist and ASRS-5 need permission). It screens, it never diagnoses, and three scoring systems now coexist. Defensible charting names the version and method, phrases the result without the grid, and surrounds it with onset, settings, collateral, differential, and an explicit status.

**Instrument identity and method** version control is the moat
**Do:** name v1.1 Part A / full checklist / ASRS-5, language, reporter, and which scoring system produced the number.
**Pitfall:** "ASRS 14" alone; the 0 to 6 count, 0 to 24 sum, and weighted 0 to 25 ASRS-5 all treat 14 differently.

**The result, stated precisely** no grid, no severity labels
**Do:** chart "5 of 6 responses reached their item-specific thresholds; positive screen" or the total with its threshold.
**Pitfall:** strata or counts rebranded as mild, moderate, or severe; no ASRS number grades severity.

**Clinical meaning, kept modest** screen, not diagnosis
**Do:** "supports proceeding to comprehensive assessment; not independently diagnostic." Negative does not exclude (sensitivity 68.7%).
**Pitfall:** "ASRS positive, ADHD confirmed"; the screen establishes none of the DSM requirements.

**Onset and settings** the DSM spine
**Do:** evidence before age 12 (records, report cards, informants) and impairment in two or more settings, with compensation noted.
**Pitfall:** "patient reports lifelong ADHD" with nothing corroborating and no functional analysis.

**Collateral and gaps** absence is data, not silence
**Do:** name what was reviewed, what was attempted, what was unavailable and why, and the effect on confidence.
**Pitfall:** treating missing collateral as disqualifying, or ignoring it entirely.

**Differential and comorbidity** where false positives live
**Do:** record mood, anxiety, sleep, substance, learning, and medical alternatives with evidence each way.
**Pitfall:** importing the 99.5% community specificity; PPV was 21.4% in depression and 0.26 in substance-use samples.

**Status, validity, next step** say where the evaluation stands
**Do:** an explicit status (screen positive, assessment pending / provisional / criteria met / deferred) plus neutral validity notes and a concrete next step.
**Pitfall:** "drug-seeking" labels; the ASRS has no validity scale and incentives are facts to document, not verdicts.

## Before the note is signed

- [ ] Instrument, version, language, reporter named
- [ ] Scoring method stated; result phrased without the grid
- [ ] Screen given an explicit status, not a diagnosis
- [ ] Childhood onset evidence named with its limits
- [ ] Two settings plus functional consequences charted
- [ ] Collateral reviewed or its absence explained
- [ ] Differential documented; validity language neutral

## Drafting with AI

Give it the facts: version and method, result, onset evidence, settings, collateral status, differential, incentives.

> *"Draft ASRS documentation: v1.1 Part A positive 5 of 6, original scoring, report cards plus sibling corroboration, GAD comorbid, status screen positive, structured interview scheduled."*

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

| **3 systems** | **4+ of 6** | **68.7% / 99.5%** | **No legal mandate** |
|---|---|---|---|
| count, sum, weighted | original positive rule | community sens / spec | payer policies differ |

Full guide and sample note: **bastiongpt.com/template/asrs**

# ASRS Documentation Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements. Contains no scale text.

Setting: | Patient (initials): | Date: | Reporter and clinician:

Instrument + version + language: | Scoring method (count / 0-24 sum / ASRS-5):

**Result**
Count or total with its threshold · positive / negative · phrased without the scoring grid

**Interpretation**
Screen result only: supports assessment, not independently diagnostic · a negative screen does not exclude

**Childhood onset (before age 12)**
Records, report cards, informants, repeated concrete examples · limits of each source

**Cross-setting impairment**
Two or more settings · symptoms vs functional consequences · compensation noted

**Collateral and gaps**
Reviewed and attempted sources · what was unavailable and why · effect on confidence

**Differential and comorbidity**
Mood, anxiety, sleep, substance, learning, medical · evidence for and against each

**Status, validity, next step**
Explicit status · incentives and inconsistencies stated neutrally · interview, records, follow-up

Clinician (name and credentials): | Signature: | Date: