

PSC-17 Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · August 2026 · Reproduces no items or form layouts

The PSC-17 is a free 17-item caregiver psychosocial screen scored as four independent signals: a total (0 to 34, positive at 15 or higher) and internalizing (positive at 5 or higher), attention (positive at 7 or higher), and externalizing (positive at 7 or higher) subscales, in points, at-or-above. A subscale can be positive under a negative total, other PSC forms use different cutoffs (28, 24, 30), and no result is a diagnosis. Defensible charting names the form and respondent, reports all four signals, and closes the loop with a date.

Exact form + family member cutoffs travel with the form

Do: name it: PSC-17 caregiver, PSC-35, Y-PSC (35-item youth), youth PSC-17 (cut-score source named), or pictorial version.

Pitfall: "PSC positive, 20": positive on the 17, negative on the 35-item forms.

Respondent + language who answered, in what, how

Do: record respondent and relationship, form language, interpreter or read-aloud help, and route; score from the administered form's own key.

Pitfall: grouped digital item numbers applied to the interleaved paper form.

All four scores points, at-or-above

Do: chart total /34 (15+) and internalizing /10 (5+), attention /10 (7+), externalizing /14 (7+), each against its own cutoff.

Pitfall: "PSC passed" hiding a positive subscale, or boundary scores called negative.

Missing responses blanks = 0; count them

Do: reconcile blanks with the respondent when possible, document the count, apply the practice's written validity rule (sources conflict at exactly four).

Pitfall: missing information silently scored as never.

The conversation what the screen exists to start

Do: for any positive signal: duration, functioning at home and school, strengths, stressors, family priorities, safety questions as indicated.

Pitfall: a positive number followed by silence.

Disposition, dated positives are less likely to return

Do: watchful waiting with a near recheck date, a targeted instrument, a warm handoff (named as such), or referral with barriers, interim supports, and an owner.

Pitfall: "recheck at next annual visit" for a positive screen.

Interpretation boundary screen, both directions

Do: positive = further assessment indicated (attention+ = ADHD evaluation trigger); negative does not rule out (subscale sensitivity 31 to 73 percent; weak for anxiety).

Pitfall: "ADHD confirmed" or "anxiety ruled out" from a screen.

Before the note is signed

- ☐ Form, respondent, and language named exactly
- ☐ All four signals charted against their own cutoffs
- ☐ Boundary scores read as positive; points, not items
- ☐ Missing responses counted; validity rule applied
- ☐ Positive signals get the documented conversation
- ☐ Disposition dated, owned, and barrier-aware
- ☐ Screen-level language in both directions

Drafting with AI

Give it the facts: form, respondent and relationship, language, all four scores, missing count, conversation content, disposition and date.

"Draft PSC-17 documentation: caregiver form, English, mother, total 11, internalizing 5 positive, attention 3, externalizing 3, school-transition worry and sleep trouble, no safety concern, recheck in four weeks with an anxiety measure."

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

4 signals, 4 cutoffs

total 15+; subscales 5+, 7+, 7+ (points)

Subscales stand alone

never chart "PSC passed"

Name the form

PSC-35 and Y-PSC cutoffs differ (28, 24, 30)

Screen, not diagnosis

negative does not rule out

PSC-17 Documentation Template

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

Setting: _____ Patient (initials): _____ Date: _____ Clinician: _____

Form + respondent + relationship: _____ Language + administration route: _____

Scores: all four signals

Total /34 (positive 15+) · internalizing /10 (5+) · attention /10 (7+) · externalizing /14 (7+) · each against its own cutoff, in points

Missing responses and validity

Count of blanks · reconciled with respondent? · practice rule applied · valid / provisional / not interpretable

Follow-up conversation

Duration and course · functioning at home, school, friends, activities · strengths · stressors · family priorities · safety questions as indicated

Interpretation

Screen result only · positive = further assessment indicated · negative does not rule out · attention elevation = evaluation trigger, not ADHD

Disposition and access plan

Watchful waiting with recheck DATE · targeted instrument · warm handoff · referral with barriers, interim supports, completion tracker, owner

Youth self-report (if used)

Form named (Y-PSC or youth PSC-17 with cut-score source) · scores kept separate · discordance described, never averaged

Declined screening or referral

Offered and explained · decision and reason if volunteered · alternatives · re-offer plan · surveillance continues

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