

## Description of Behavioral and Symptom Inventories

**a. Bipolar Child Parent Questionnaire - Version 2.0 (BCQ v. 2.0):** The BCQ v. 2.0 is the most recent version of a 65-item symptom and behavioral inventory that is comprised of items drawn from DSM-IV criteria of the major childhood psychiatric disorders. This instrument has been found to be useful as a rapid screening instrument to identify manic children in clinical settings, and has been found to yield reliable and valid diagnoses in children and adolescents with BPD. (Abstract NIMH Conference on Pediatric Mania, March 2003). The BCQ records, in a standardized format, the behavioral problems of children aged 7-17, as reported by their parents or parent surrogates. The BCQ v. 2.0 will be used as an initial screening instrument to determine that is linked to research criteria for COBPD .

**b. The Behavior Rating Inventory of Executive Function (BRIEF), Parent Version** is an 86-item instrument which assesses executive functions in children and adolescents. Answers are rated on a scale of N = Never, S = Sometimes, and O = Often. These scores also help to identify which type of executive function difficulty the child may have: Mental Flexibility, Emotional Flexibility, or Flexibility of Motor Activity.

**c. The Child Behavior Checklist (CBCL)** is a 113 item, Likert-scale instrument designed to assess the severity of various behaviors exhibited by children ages 6 to 18. This instrument is filled out by parents about their children and describes the child's behavior as it is currently or has been over the past six months. The CBCL assesses two categories of behaviors - internalizing and externalizing, and provides scores for each.

**d. The Child Yale-Brown Obsessive-Compulsive Scale (CY-BOCS).** The CY-BOCS yields reliable and valid subscale and total scores for obsessive-compulsive symptom severity in children and adolescents with OCD (Scahill L et al 1997). The adult version, from which the CY-BOCS is derived, has been found, as a self-rated instrument, to show excellent internal consistency and test-retest reliability, performing somewhat better than the interview. There is good agreement between symptom checklist categories across the two versions, though clinical subjects reported more symptoms on the self-report form than on the interview. The self-report version showed strong convergent validity with the interview, and discriminated well between OCD and non-OCD patients.

**e. Overt Aggression Scale (OAS):** The OAS is a well validated scale for the measurement of specific aggressive behaviors. The OAS was originally developed as a method for the assessment of the response of patients with aggressive behaviors to tranquilizing medications on a psychiatric inpatient service, and has subsequently been used in studies ranging from adult inmates, to inpatient schizophrenia units, to outpatient affective disorders. More pertinently, use of this scale has extended to children with conduct disorder (Malone et al., 1994; Kafantaris et al., 1996). The OAS measures four types of aggression: Verbal aggression, physical aggression against objects, physical aggression towards self, and physical aggression towards others

(Yudofsky et al., 1986). A modified version of the OAS will be administered to parents as a means of assessing rates of aggressive behaviors.

**f. The Self-Report For Childhood Anxiety Related Disorders**

**(SCARED)**, Child Form (8 Years and Older) is a 41-item screening tool to assess anxiety in childhood. Children participating in the study will use the SCARED as a self-report form to rate the degree and level of their anxiety. The SCARED focuses on 5 sub-types of anxiety: panic/somatic, generalized anxiety, separation anxiety, social phobia, and school phobia (Birmaher et al, 1999).

**g. The Short Sensory Profile (SES)**, is a 38-item assessment developed by Occupational Therapist and Ph.D., Winnie Dunn. This instrument measures sensory and motor domains in children. There are 7 subscales: Tactile Sensitivity, Taste/Smell Sensitivity, Movement Sensitivity, Underresponsive/Seeks Sensation, Auditory Filtering, Low Energy/Weak and Visual/Auditory Sensitivity. A raw score is tallied for each subscale, which enables the user to differentiate between normal, subthreshold and threshold diagnoses in these areas.

**h. The Yale-Brown Obsessive-Compulsive Scale (YBOCS)**. The 37-item YBOCS is the adult version of the scale, from which the CY-BOCS is derived. The YBOCS has been found, as a self-rated instrument, to show excellent internal consistency and test-retest reliability, performing somewhat better than the interview.