

Full Name of Measure	Abbreviation	Brief Description	Reference
6 Minute Walk	6MWT	The 6MWT is a practical simple test that requires a 100-ft hallway but no exercise equipment or advanced training for technicians. Walking is an activity performed daily by all but the most severely impaired patients. This test measures the distance that a patient can quickly walk on a flat, hard surface in a period of 6 minutes (the 6MWD). It evaluates the global and integrated responses of all the systems involved during exercise, including the pulmonary and cardiovascular systems, systemic circulation, peripheral circulation, blood, neuromuscular units, and muscle metabolism. This assessment will be completed for all subjects 4 and up and will take approximately 10 minutes to complete.	Guyatt, G. et al. (1985). The 6-minute walk: a new measure of exercise capacity in patients with chronic heart failure. <i>Canadian Medical Association Journal</i> , 132(8):919-23.
Adolescent Risk-taking Questionnaire	ARQ	The ARQ is a two-part questionnaire that enables the assessment of adolescent risk-taking behaviors in addition to perceptions of the risk of these behaviors. The 44-item questionnaire involves the rating of each item twice, first in relation to judgment of riskiness (on a 5-point Likert scale from 0=not at all risky to 4=extremely risky) and a second time in relation to frequency of participation in the behavior (also on a 5-point scale from 0=never done to 4=done very often). The ARQ will only be used with subjects ages 11-18 (self-report). This assessment takes approximately 15 minutes to complete.	Gullone, E., Moore, S., Moss, S., & Boyd, C. (2000). The Adolescent Risk Taking Questionnaire: Development and psychometric evaluation. <i>Journal of Adolescent Research</i> , 15(2), 231-250.

Adult Self Report	ASR	The ASR is a self-administered instrument that examines diverse aspects of adaptive functioning and problems. This scale will take approximately 10 minutes to complete.	Achenbach T., Rescorla, L. (2003). Manual for the ASEBA Adult Forms & Profiles. Burlington, VT: University of Vermont, Research Center for Children, Youth, and Families.
Autism Spectrum Screening Questionnaire	ASSQ	The ASSQ is a 27 item checklist that was developed as a screening instrument to be completed by lay informants for autistic disorders in high functioning children, especially Asperger's disorder. It is not intended for diagnostic purposes, but as a measure for identifying children who need a more comprehensive evaluation. This scale will be completed by parents for children ages 6-17 and be completed as a self-report for adults 18 and over. It takes approximately 10 minutes.	Ehlers, S., C. Gillberg, et al. (1999). A Screening Questionnaire for Asperger Syndrome and Other High-Functioning Autism Spectrum Disorders in School Age Children." <i>Journal of Autism and Developmental Disorders</i> , 29(2), 129-141.
Beck Depression Inventory-II	BDI	Beck Depression Inventory (often abbreviated as BDI) is a depression test to measure the severity and depth of depression symptoms. Questions of the BDI II assess the typical symptoms of depression such as mood, pessimism, sense of failure, self-dissatisfaction, guilt, punishment, self-dislike, self-accusation, suicidal ideas, crying, irritability, social withdrawal, body image, work difficulties, insomnia, fatigue, appetite, weight loss, bodily preoccupation, and loss of libido. This is a self-report scale for those ages 18 -80 that takes approximately 5 minutes to complete.	Beck, A., Steer, R., Brown, G. (1996). Manual for Beck Depression Inventory II (BDI-II). San Antonio, TX, Psychology Corporation.
Behavior Assessment for Children – Second Edition	BASC-2	The scale measures emotional and behavioral problems and adaptive behavior.	Reynolds, C.R. & Kamphaus, R.W. (2006). BASC-2:

		The Parent Rating Scales (PRS) measures both adaptive and problem behaviors in the community and home setting. Parents or caregivers can complete forms at three age levels—preschool (ages 2 to 5), child (ages 6 to 11), and adolescent (ages 12 to 21) in about 10–20 minutes. The PRS contains 134-160 items and uses a four-choice response format. The parent rating scale of the BASC-2 will be completed by parents of children ages 4-17 and will take 15 minutes.	Behavior Assessment System for Children, Second Edition. Upper Saddle River, NJ: Pearson Education, Inc.
Child Behavior Checklist (CBCL)	CBCL	The CBCL is a device by which parents or other individuals who know the child well rate a child's problem behaviors and competencies. The CBCL can also be used to measure a child's change in behavior over time or following a treatment. The CBCL can be self-administered or administered by an interviewer. It consists of 118 items related to behavior problems which are scored on a 3-point scale ranging from not true to often true of the child. There are also 20 social competency items used to obtain parents' reports of the amount and quality of their child's participation in sports, hobbies, games, activities, organizations, jobs and chores, friendships, how well the child gets along with others and plays and works by him/herself, and school functioning. This assessment will only be completed for subjects ages 4-17. It will take parents approximately 20 minutes to complete.	Achenbach, T. M. (1991). Integrative Guide to the 1991 CBCL/4-18, YSR, and TRF Profiles. Burlington, VT: University of Vermont, Department of Psychology.
Children's Depression Inventory	CDI	The Children's Depression Inventory (CDI) is a self-report measure of symptoms of depression among children and adolescents (ages 7-17	Kovacs, M. (1985). The Children's Depression, Inventory (CDI).

Children's Depression Inventory	CDI	The Children's Depression Inventory (CDI) is a self-report measure of symptoms of depression among children and adolescents (ages 7-17 years). The CDI assesses a range of depressive symptoms, including disturbed mood, impaired hedonic capacity, vegetative functions, self-evaluation, and interpersonal behaviors. The CDI has 27 items, is self-report and take approximately 15 minutes.	Kovacs, M. (1985). The Children's Depression, Inventory (CDI). <i>Psychopharmacology bulletin</i> 21(4): 995-998.
Children's Eating Behavior Questionnaire	CEBQ	For children ages 4-11 the Children's Eating Behavior Questionnaire (CEBQ) will be administered. The CEBQ is completed by the parent and is a measure designed to assess variation in eating style among children. This scale takes no longer than 10 minutes to complete.	Wardle, J., Guthrie, C.A., Sanderson, S., and Rapoport, L. (2001). Development of the Children's Eating Behaviour Questionnaire. <i>Journal of Child Psychology and Psychiatry and Allied Disciplines</i> , 42 (7). 963-970.
Cognitive Appraisal of Risky Events	CARE	The CARE questionnaire was designed to assess perceptions of the risks and benefits associated with risky behavior. The CARE is a 30 item, six factor measures which assesses Risk, Benefit, and Expected Involvement for Risky Sexual Behavior, Heavy Drinking, Illicit Drug Use, Aggressive and Illegal Behaviors, Irresponsible Academic/Work Behaviors, and High Risk Sports. This assessment takes approximately 15 minutes to complete.	Fromme, K., Katz, E. C., & Rivet, K. (1997). Outcome expectancies and risk-taking behavior. <i>Cognitive Therapy and Research</i> , 21(4), 421-442.
Delis-Kaplan Executive Function System	D-KEFS	The D-KEFS is a standardized set of tests to evaluate higher level cognitive functions in both children and adults. The test is comprised of nine stand-alone tests, comprehensively assesses the key components of executive functions believed to be important in the development of the brain. This	Delis, D. C., J. H. Kramer, et al. (2004). Reliability and validity of the Delis-Kaplan Executive Function System: an update. <i>Journal of the International Neuropsychological Society</i>

Demographics		We will collect a medication history as well as any previous hospitalizations and all prior treatment information. We will also collect demographic information such as gender, ethnicity, and education. This information will be collected for all subjects. For subjects between the ages of 4 and 17, this information will be collected from the parent. Project developed.	Project Developed
Fagerstrom Test for Nicotine Dependence		This questionnaire examines nicotine consumption and intake habits in adults (18+) who smoke cigarettes. This assessment takes less than 5 minutes to complete.	Fagerstrom, K.O. (1978). Measuring degree of physical dependence to tobacco smoking with reference to individualization of treatment. <i>Addictive Behavior</i> , 3(3-4):235-41.
Fagerstrom Tolerance Questionnaire for Adolescents		This questionnaire is designed to examine nicotine intake and habits in adolescents. Therefore, we will only administer the questionnaire to adolescents ages 12 to 17. This assessment takes less than 5 minutes to complete.	Fagerstrom, K. O. and N. G. Schneider (1989). Measuring nicotine dependence: A review of the Fagerstrom Tolerance Questionnaire. <i>Journal of Behavioral Medicine</i> 12(2): 159-182.
Imaging		Imaging sequences have been run on the 3.0 Tesla Siemens MRI currently in the Center for Advanced Brain Imaging at the Nathan Kline Institute.	Project Developed
Wechsler Abbreviated Scale of Intelligence	WASI	All subjects will be administered a brief IQ test (WASI). The Wechsler Abbreviated Scale of Intelligence provides a full scale intelligence quotient (FSIQ), verbal IQ (VIQ), and performance IQ (PIQ) for ages 6-89 years. The Vocabulary, Similarities, Block Design, and Matrix Reasoning subtests will be used to	Wechsler, D. (1999). Wechsler Abbreviated Scale of Intelligence. San Antonio, TX: The Psychological Corporation.

		estimate Full Scale IQ. It can be easily administered by any study team member following brief training.	
Media Multitasking Index		The questionnaire addresses 12 different media forms with respondents reporting the total number of hours a week spent using the medium. It was developed to identify groups of heavy and light media use. It takes approximately 20 minutes and will be self-administered to those 18 and up. We will also ask children ages 11 and up to complete the questionnaire.	Ophir, E., C. Nass, et al. (2009). Cognitive control in media multitaskers. Proceedings of the National Academy of Sciences of the United States of America 106(37): 15583-15587.
Multidimensional Anxiety Scale for Children	MASC	The MASC is a normed 39-item self-report questionnaire that assesses anxiety in children and adolescents. It uses four basic scales (physical symptoms, harm avoidance, social anxiety, and separation/panic), one scale measuring total anxiety, and two additional indexes, anxiety disorder and inconsistency. The scale takes less than 15 minutes to complete and will be self-administered by those ages 8-19.	March, J. S. (1998). Multidimensional anxiety scale for children. North Tonawanda, NY: Multi Health Systems.
Older Adult Self Report	OASR	The OASR is a self-administered instrument appropriate for ages 60-90 years and older that examines diverse aspects of adaptive functioning and problems. This scale will take approximately 10 minutes to complete.	Achenbach, T. M., Newhouse, P.A., & Rescorla, L. A. (2004). Manual for the ASEBA Older Adult Forms & Profiles. Burlington, VT: University of Vermont, Research Center for Children, Youth, & Families.
Physical Measures		We will collect blood pressure, heart rate, height, weight and waist and hip measurements for both children and adults. Project developed.	Project Developed
Repetitive Behavior Scale-Revised	RBS-R	The RBS-R is an empirically derived clinical rating scale for measuring the presence and severity of repetitive behaviors. The RBS-R	Lam, K. S. L. and M. G. Aman (2007). The Repetitive Behavior Scale-Revised: independent

		provides a quantitative, continuous measure of the full spectrum of repetitive behaviors. The RBS-R consists of six subscales (Stereotyped Behavior, Self-injurious Behavior, Compulsive Behavior, Routine Behavior, Sameness Behavior, and Restricted Behavior) that have no overlap of item content. This permits differential identification and scoring of discrete varieties of repetitive behaviors. This scale will be completed by parents of children ages 4-17 and as a self-report for adults 18 and over. It will take approximately 15 minutes to complete.	validation in individuals with autism spectrum disorders. <i>Journal of Autism and Developmental Disorders</i> , 37(5): 855-866.
Social Responsiveness Scale	SRS	The SRS is a 65-item questionnaire that measures deficiency in reciprocal social behavior as a continuous variable. It inquires about reciprocal social behavior, social use of language, and repetitive and restrictive behaviors. Each item on the scale inquires about an observed aspect of reciprocity behavior rated on a scale from "0" (never true) to "3" (almost always true). The parent rates the child's symptoms on a 4 point scale, 1 = not true, 2 = sometimes true, 3 = often true, and 4 = almost always true. It generates singular scale scores. Higher scores on the SRS indicate higher degrees of social impairment. Psychometric properties of the scale are reported in several studies of Constantino's group involving up to 1000 children from 4 to 18 years of age, showing that the social impairment detectable by the scale is continuously distributed in children. A total SRS Score equal or less than 60 indicate social skills characteristic of typically developing children. It	Constantino J.N. et. al, (2003). Validation of a brief quantitative measure of autistic traits: comparison of the social responsiveness scale with the autism diagnostic interview-revised. <i>Journal of Autism and Developmental Disorders</i> , 33: 427-433.

		can be completed in 15-20 minutes by the parent for children ages 4-17. Adults will also be asked to rate themselves on this assessment.	
State Trait Anxiety Inventory	STAI	The STAI is used to measure anxiety in adults 18+. A version is available for children. Helps distinguish feelings of anxiety from depression. The STAI Form clearly differentiates between the temporary condition of “state anxiety” verses the more general and long standing quality of ”trait anxiety.” The STAI has forty questions with a range of four possible responses to each (Likert scale). The STAI is a self-report measure and takes approximately 10 minutes.	Spielberger, C. D., Gorsuch, R.L., and Lushene. R.E. (1970). Manual for the State-Trait Anxiety Inventory. Palo Alto, CA: Consulting Psychologists Press
Tic Screener – Adapted	TICS	The Tics Screener – Adapted is an abbreviated version of the Yale Global Tic Severity Scale (YGTSS), which is a clinical rating instrument designed for use in studies of Tourette's syndrome and other tic disorders and was normed with subjects ages 5 to 51 years.	Leckman, J.F., Riddle, M.A., Hardin, M.T., Ort, S.I., Swartz, K.L., Stevenson, J.O. & Cohen, J.D. (1989). The Yale Global Tic Severity Scale: Initial Testing of a Clinician-Rated Scale of Tic Severity. <i>Journal of the American Academy of Child & Adolescent Psychiatry</i> , 28: 566-573.
Three Factor Eating Questionnaire	TFEQ	The Three-Factor Eating Questionnaire (eating inventory) is a 51- item questionnaire designed to measure restrained eating, or the tendency to restrict food intake to control body weight. In addition, it measures two other aspects of eating behavior: (a) disinhibition of the control of eating and (b) perceived hunger. The Three Factor Eating Questionnaire is a self-administered assessment for subjects ages 12-99. This scale takes no longer than 10 minutes to	Stunkard, A. J. & Messick, S. (1985). The three-factor eating questionnaire to measure dietary restraint, disinhibition, and hunger. <i>Journal of Psychosomatic Research</i> , 29: 71–83.

		complete.	
Trauma Symptom Checklist for Children	TSC-C	This brief self-report inventory assesses posttraumatic stress in 8- to 16-year-olds who have experienced traumatic events such as physical or sexual abuse, major loss, natural disaster, or violence. Composed of 54 items, the TSCC includes six clinical scales: Anxiety, Depression, Anger, Posttraumatic Stress, Dissociation, and Sexual Concerns. In addition, two validity scales alert you to under- and over-reporting. The test can be completed in 15 to 20 minutes and then scored in just a few minutes more. Profile Forms allow you to quickly convert raw scores to age- and sex-appropriate T-scores and graph the results. The test was standardized on more than 3,000 children and teens from inner-city, urban, and suburban settings in the general population. Data from trauma and child abuse centers are also provided. Demonstrating high reliability and predictive validity, the TSCC can help evaluate acute and chronic posttraumatic symptoms in children and adolescents.	Briere, J. (1996). <i>Trauma Symptom Checklist for Children (TSCC) Professional Manual</i> . Odessa, FL: Psychological Assessment Resources.
Trauma Symptom Checklist for Adults	TSC-40	The TSC-40 is a 40-item self-report instrument consisting of six subscales: Anxiety, Depression, Dissociation, Sexual Abuse Trauma Index (SATI), Sexual Problems, and Sleep Disturbance, as well as a total score. Each symptom item is rated according to its frequency of occurrence over the prior two months, using a four point scale ranging from 0 ("never") to 3 ("often"). The TSC-40 requires approximately 10-15 minutes to complete, and can be scored in	Elliot, D. M. & Briere, J. (1992). Sexual abuse trauma among professional women: Validating the Trauma Symptom Checklist – 40 (TSC-40). <i>Child Abuse & Neglect</i> , 16, 391-398.

Trauma Symptom Checklist for Adults	TSC-40	The TSC-40 is a 40-item self-report instrument consisting of six subscales: Anxiety, Depression, Dissociation, Sexual Abuse Trauma Index (SATI), Sexual Problems, and Sleep Disturbance, as well as a total score. Each symptom item is rated according to its frequency of occurrence over the prior two months, using a four point scale ranging from 0 ("never") to 3 ("often"). The TSC-40 requires approximately 10-15 minutes to complete, and can be scored in approximately 5-10 minutes. This will be completed by adults 18 and up.	Elliot, D. M. & Briere, J. (1992). Sexual abuse trauma among professional women: Validating the Trauma Symptom Checklist – 40 (TSC-40). <i>Child Abuse & Neglect</i> , 16, 391-398.
UPPS Impulsive Behavior Scale	UPPS-P	The UPPS-P is a 59 item Likert-type scale designed to assess lack of planning, lack of perseverance, negative urgency, positive urgency, and sensation seeking. It is administered to age 18 and up and takes approximately 5 minutes to complete.	Whiteside, S. P. and D. R. Lynam (2001). The Five Factor Model and impulsivity: using a structural model of personality to understand impulsivity. <i>Personality and Individual Differences</i> , 30(4): 669-689.
Vineland Adaptive Behavior Scales – Revised		The Vineland Adaptive Behavior Scales-Revised are designed to assess the adaptive behavior of individuals from birth to adulthood. The domains covered are communication, daily living skills, socialization, and motor skills. The scale contains 297 items and is a semi-structured interview. This will be administered to parents of	Sparrow, S., Cicchetti, D., & Balla, D. (2005). <i>Vineland Adaptive Behavior Scales</i> (2nd ed.). Minneapolis, MN: Pearson Assessment.