

Identidys

Screening scale for "DYS"

Identidys is a screening scale for « DYS »
or similar neurodevelopmental disorders such as
ADHD (Attention Deficit and Hyperactivity Disorder),
language disorder, specific learning disorder impairing reading
and/or written expression, developmental coordination disorder,
dysexecutive syndrome.

It is a scale designed for parents with school-aged children,
from 3rd year (or 2nd grade)(7 years old)
till 10th year (9th grade)(14 years old).

NAME / First name of the child

*Say (in relation to what you can observe in your child),
if the reported situations occur:*

Yes - Very often

Rarely - Anecdotal situations

No - Never

P.S. You are also free to add comments to clarify your answers.

DOMAIN A

Attention/Hyperactivity/Impulsiveness

Your child has difficulties sustaining their attention (staying focused for long periods of time even on leisure activities) AND/OR tends to withdraw or disengage from tasks requiring sustained mental effort (including activities outside of school, e.g. board games).

YES / Rarely / NO

COMMENTS (optional)

Your child is easily distracted by what is going on around him.

YES / Rarely / NO

COMMENTS (optional)

Your child frequently forgets everyday things (instructions, notebooks, keys...) AND/OR regularly loses objects or things needed for their work or activities (bag, pencil case, laptop...).

YES / Rarely / NO

COMMENTS (optional)

A lack of attention is observed in the school environment (school and homework).

YES / Rarely / NO

COMMENTS (optional)

A lack of attention is observed in the private sphere (leisure and daily activities).

YES / Rarely / NO

COMMENTS (optional)

A lack of attention has been present for more than 6 months.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties waiting his turn (turn-taking, self-service, lunchroom, board games...).

YES / Rarely / NO

COMMENTS (optional)

Your child often gets up in situations where he/she is supposed to remain calm and seated (in class, movies, board games) AND/OR is constantly on the move at school and/or in leisure activities.

YES / Rarely / NO

COMMENTS (optional)

Your child tends to act faster than he/she thinks, answering questions before they are fully asked.

YES / Rarely / NO

COMMENTS (optional)

Your child has trouble going to bed or falling asleep because of restlessness/excitement AND/OR never seems to be tired and regularly shows the need to be active (including during meals).

YES / Rarely / NO

COMMENTS (optional)

Their restlessness / impulsiveness has been present in the school environment (school and homework) for over 6 months.

YES / Rarely / NO

COMMENTS (optional)

Their restlessness/impulsiveness has been present in the private sphere (leisure, daily activities) for over 6 months.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties understanding the meaning of conversations.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties in finding the right words (lack of words).

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties summarizing or telling a story coherently.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties in expressing themselves (not always understood).

YES / Rarely / NO

COMMENTS (optional)

Your child is more successful when instructions are rephrased.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties structuring sentences correctly.

YES / Rarely / NO

COMMENTS (optional)

Language took a long time to develop (your child was not making sentences when starting Kindergarten /preschool/infant school) AND/OR was not understood very well.

YES / Rarely / NO

COMMENTS (optional)

Your child does not have a large vocabulary.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties conjugating verbs.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties connecting with other children of his/her age.

YES / Rarely / NO

COMMENTS (optional)

Your child was short-tempered or cried often in early childhood.

YES / Rarely / NO

COMMENTS (optional)

Your child has a tendency to mimic (copy) what others are doing in class.

YES / Rarely / NO

COMMENTS (optional)

Your child is having difficulties understanding what he/she is reading.

YES / Rarely / NO

COMMENTS (optional)

It is regularly necessary to rephrase or read instructions to him/her.

YES / Rarely / NO

COMMENTS (optional)

Your child is more successful when instructions are rephrased.

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties learning multiplication tables.

YES / Rarely / NO

COMMENTS (optional)

It is necessary to insist regularly on multiplication tables but the next day your child forgets what they learned the day before.

YES / Rarely / NO

COMMENTS (optional)

Your child is slow in copying (on the board) or in taking notes.

YES / Rarely / NO

COMMENTS (optional)

Your child makes many spelling mistakes and may write the same word in different ways.

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties writing (messy handwriting/poor quality) but manages to write correctly when given time.

YES / Rarely / NO

COMMENTS (optional)

Your child does not like to read AND/OR does not read.

YES / Rarely / NO

COMMENTS (optional)

Your child does not have functional time management skills (time management, confusing days, months).

YES / Rarely / NO

COMMENTS (optional)

Your child does not manage to write down all of his/her lessons.

YES / Rarely / NO

COMMENTS (optional)

Your child is unable to reread their lessons because their handwriting is very poor.

YES / Rarely / NO

COMMENTS (optional)

DOMAIN D

Motor skills/Spatial awareness

Your child has difficulties in geometry (spatial orientation or lack of precision).

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties in mathematics (setting-up operations, reading a double entry table).

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties in sports activities (requiring balance and good coordination).

YES / Rarely / NO

COMMENTS (optional)

Your child shows difficulties in the use of some school instruments (compass, rulers...).

YES / Rarely / NO

COMMENTS (optional)

Your child shows difficulties in using some everyday objects (knife, forks, bottle...).

YES / Rarely / NO

COMMENTS (optional)

Your child is clumsy when helping around the house (bumping into things, knocking things over).

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties in writing (messy handwriting) and cannot write correctly, even when given time.

YES / Rarely / NO

COMMENTS (optional)

Your child shows difficulties in fine motor skills (tying shoelaces, buttoning, coloring, cutting...).

YES / Rarely / NO

COMMENTS (optional)

Your child shows difficulties in gross motor skills (running, jumping, sports activities...).

YES / Rarely / NO

COMMENTS (optional)

Your child does not like to draw (what are the reasons according to him?).

YES / Rarely / NO

COMMENTS (optional)

Your child does not manage to find his way in space (loss of reference in a known place).

YES / Rarely / NO

COMMENTS (optional)

Your child shows difficulties in dressing (orientation of clothes, ease...).

YES / Rarely / NO

COMMENTS (optional)

Your child has difficulties using the advice given in a problematic situation and perseveres excessively in his/her mistake.

YES / Rarely / NO

COMMENTS (optional)

Your child asks you the same question several times despite the fact that you have already answered them AND/OR perseveres by performing the same action several times.

YES / Rarely / NO

COMMENTS (optional)

Your child cannot stop touching or picking up objects in his/her environment, even if they are not within reach.

YES / Rarely / NO

COMMENTS (optional)

Your child cannot help it but regularly deviates to another topic of conversation as he/she speaks.

YES / Rarely / NO

COMMENTS (optional)

Your child has great difficulties developing different solutions to the same problematic situation.

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties seeing the same situation from several points of view.

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties remembering a long instruction (usually only remembers the beginning or the end).

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties with rote learning (poetry, multiplication tables...).

YES / Rarely / NO

COMMENTS (optional)

Your child seems to quickly forget what was initially asked of him/her if an external element disturbs him/her in the meantime.

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties replacing or adding information to his/her reasoning without losing the thread.

YES / Rarely / NO

COMMENTS (optional)

Your child is passive when faced with situations involving decision-making.

YES / Rarely / NO

COMMENTS (optional)

Your child has significant difficulties planning activities (appropriate to their age).

YES / Rarely / NO

COMMENTS (optional)

Attention: version translated from French

Transfer the sum of the points calculated on each of the scales below.

Refer to the "Identidys user's manual" document for the steps to follow according to the zone your child is in for each sphere.

Domain A : Attention/Hyperactivity/Impulsiveness



Domain B : Oral language



Domain C : Written language



Domain D : Motor skills/Spatial awareness



Domain E : Executive functioning

