Pediatric Cognitive Function - Short Form 7a

Please respond to each question or statement by marking one box per row.

In the past 4 weeks…

		None of the time	A little of the time	Some of the time	Most of the time	All of the time
pedsPCF5_FC	I have to use written lists more often than other people my age so I will not forget things	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
NQCOG44_2C	It is hard for me to pay attention to one thing for more than 5-10 minutes	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
NQCOG65_2C	I have trouble keeping track of what I am doing if I get interrupted.....	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
pB10_FC	I have to read things several times to understand them	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
pB8_FC	I forget things easily	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
pedsPCF8_FC	I have to work really hard to pay attention or I make mistakes.....	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
pedsPCF6_FC	I have trouble remembering to do things like school projects or chores	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1

© 2010-2017 PROMIS Health Organization and PROMIS Cooperative Group