

History of Symptoms and Behaviors

To be completed by parents

Directions: List all the symptoms or behaviors your child has shown since infancy that were anxious, obsessive or ritualistic in nature. Note at approximately what age the behavior began and ended or how long it lasted.

<i>Child's Name:</i>	<i>Age:</i>	<i>Date:</i>
<i>Symptoms or behaviors</i>	<i>Began at: Age, year or month</i>	<i>Ended at: Age, year or month</i>