PSYCHOTIC AND ASSOCIATED SYMPTOMS

THIS MODULE IS FOR CODING PSYCHOTIC AND ASSOCIATED SYMPTOMS THAT HAVE BEEN PRESENT AT ANY POINT IN THE PERSON'S LIFETIME.

FOR ANY PSYCHOTIC AND ASSOCIATED SYMPTOMS CODED "3," DETERMINE WHETHER THE SYMPTOM IS DEFINITELY "PRIMARY" OR WHETHER THERE IS A POSSIBLE OR DEFINITE ETIOLOGIC SUBSTANCE (INCLUDING MEDICATIONS) OR GENERAL MEDICAL CONDITION. THE FOLLOWING QUESTIONS MAY BE USEFUL IF THE OVERVIEW HAS NOT ALREADY PROVIDED THE INFORMATION:

Just before you began having (PSYCHOTIC SXS), were you taking any drugs or medicines? ...drinking a lot?...physically ill?

IF YES TO ANY: Has there been a time when you had (PSYCHOTIC SXS) when you were not (USING DRUGS/ TAKING MEDS/ DRINKING/ PHYSICALLY ILL?

IF HAS NOT ACKNOWL - EDGED PSYCHOTIC SXS: Now I am going to ask you about unusual experiences that people sometimes have.

IF HAS ACKNOWLEDGED PSYCHOTIC SXS: You have told me about (PSYCHOTIC EXPERI - ENCES). Now I am going to ask you more about those kinds of things.

DELUSIONS

False personal beliefs based on incorrect inference about external reality and firmly sustained in spite of what almost everyone else believes and in spite of what constitutes incontrovertible and obvious proof or evidence to the contrary. Code overvalued ideas [unreasonable and sustained beliefs that are maintained with less than delusional intensity] as "2."

NOTE: A SINGLE DELUSION MAY BE CODED "3" ON MORE THAN ONE OF THE FOLLOWING ITEMS.

Did it ever seem that people were talking about you or taking special notice of you?

What about receiving special messages from the TV, radio, or magazines, or from the way things were arranged around you?

Delusions of reference, i.e., events, objects, or other people in the individual's immediate environment have a particular or unusual significance.

DESCRIBE:

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Consider ***Psychotic Disorder due to GME***

Primary

What about feeling that someone is giving you a hard time or trying to hurt you?

IF YES: Who is trying to hurt you? Does anyone else think that's true?

Persecutory delusion, i.e., the false belief that the individual (or his or her group) is being attacked, harassed, cheated, persecuted or conspired against

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Consider ***Psychotic Disorder due to GME***

Primary

Did you ever feel that you were especially important in some way, or that you had powers to do things that other people couldn't do?

IF YES: Tell me more about them? Is it like being a super hero? Are these special powers that other kids don't have?

Grandiose delusion, i.e., content involves exaggerated power, knowledge or importance, or a special relationship to a deity or famous person.

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Consider ***Psychotic Disorder due to GME***

Primary

Did you ever feel that parts of your body had changed or stopped working? (What did your parents or doctor say?)

Somatic delusion, i.e., content involves change or disturbance in body appearance or functioning.

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Consider ***Psychotic Disorder due to GME***

Primary

(Did you ever feel that you had committed a crime or done something terrible for which you should be punished?)

Other delusions, e.g., delusions or guilt, jealousy, poverty, erotomania

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Consider ***Psychotic Disorder due to GME***

Primary

Did you ever feel that someone or something outside yourself was controlling your thoughts or actions against your will?

IF YES: Was this a made-up person who was making you do bad things that you didn't want to do? What kinds of things did you have to do?

(Did you ever feel that certain thoughts were not your own, or were being put into your head?)

(What about thoughts being stolen from your head?)

Delusion of being controlled, i.e., feelings, impulses, thoughts or actions are experienced as being under the control of some external force.

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Consider ***Psychotic Disorder due to GME***

Primary

Did you ever feel as if your thoughts were being broadcast out loud, like over a loudspeaker?

IF YES: Was it so loud that other people could actually hear what you were thinking without your having to say a word?

Thought broadcasting, i.e., the delusion that one's thoughts are audible to others.

DESCRIBE:

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Consider ***Psychotic Disorder due to GME***

Primary

How do you explain [CONTENT OF DELUSION]?

Bizarre delusion, i.e., involving a phenomenon that the individual's subculture would regard as totally implausible (e.g., a stranger has removed the person's brain and has replaced it with someone else's brain).

DESCRIBE:

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Consider ***Psychotic Disorder due to GME***

Primary

IF NEVER HAD A PRIMARY DELUSION, CHECK HERE _____ AND GO TO * **AUDITORY HALLUCINATIONS,* C.4**

HALLUCINATIONS

HALLUCINATIONS (PSYCHOTIC)

A sensory perception that has the compelling sense of reality of a true perception but occurs without external stimulation of the relevant sensory organ. (CODE "2" FOR HALLUCINATIONS THAT ARE SO TRANSIENT AS TO BE WITHOUT DIAGNOSTIC SIGNIFICANCE)

Did you ever hear things that other people couldn't hear, like noises or voices of people whispering or talking? (Were you awake at the time?)

Auditory hallucinations when fully awake and heard either inside or outside of head

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Consider ***Psychotic Disorder due to GME***

Primary

IF VOICES: Did they comment on what you were doing or thinking?

A voice keeping up a running commentary on the individual's behavior or thoughts as they occur

How many voices did you hear? Were they talking to each other?

Two or more voices conversing with each other

Did you ever have visions or see things that other people couldn't see, like ghosts or animals or anything else? (Were you awake at the time?)

NOTE: DISTINGUISH FROM AN ILLUSION, I.E., A MISPERCEPTION OF A REAL EXTERNAL STIMULUS.

Visual hallucinations

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Consider ***Psychotic Disorder due to GME***

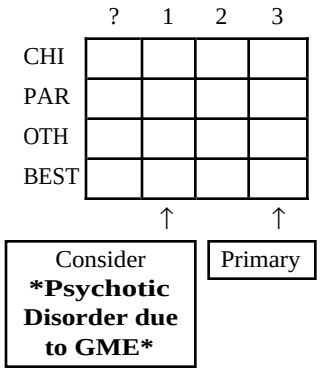
Primary

What about strange feelings in your body or on your skin, like bugs crawling on you or electricity shooting through your body?

IF YES: Tell me more about that. (Was there a reason that this was happening, like you were sick with a fever or were using drugs?)

Tactile hallucinations, e.g., electricity

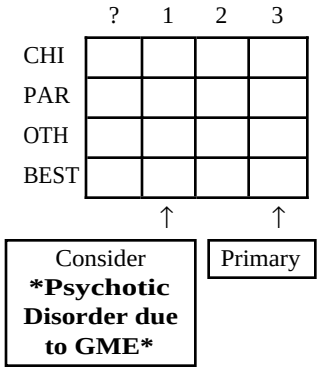
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(What about smelling things that other people couldn't smell?)

Other hallucinations, e.g., gustatory, olfactory

DESCRIBE:



OTHER SYMPTOMS

(Let me just stop for a minute while I take a few notes...)

THE FOLLOWING ITEMS ARE RATED BASED ON OBSERVATION AND HISTORY (CONSULT OLD CHARTS, OTHER OBSERVERS, E.G., FAMILY MEMBERS, THERAPEUTIC STAFF).

OTHER SYMPTOMS

Catatonic behavior:
motoric immobility (i.e., cataplexy or stupor)
excessive motor activity (i.e., apparently purposeless agitation not influenced by external stimuli)
extreme negativism (i.e., apparently motiveless resistance to instructions or attempts to be moved)
mutism, posturing or stereotyped movements
echolalia or echopraxia

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Consider ***Psychotic Disorder due to GME*** | Primary

Grossly disorganized behavior: may range from childlike silliness to unpredictable agitation. The person may appear markedly disheveled, may dress in an unusual manner (e.g., wearing multiple overcoats, scarves, and gloves on a hot day), display clearly inappropriate sexual behavior (e.g., public masturbation) or unpredictable and untriggered agitation (e.g., shouting or swearing).

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Consider ***Psychotic Disorder due to GME*** | Primary

Grossly inappropriate affect: affect that is clearly discordant with the content of speech or ideation, e.g., smiling while discussing being persecuted.

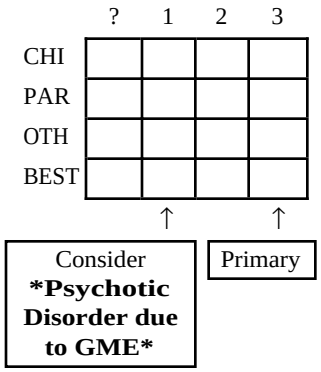
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Consider ***Psychotic Disorder due to GME*** | Primary

Disorganized speech ("loosening of associations"): frequent derailment or incoherence; derailment is a pattern of speech in which the ideas slip off the track onto another that is completely unrelated or only obliquely related. The person may shift the topic idiosyncratically from one frame of reference to another and things may be said in juxtaposition that lack a meaningful relationship. Incoherence is speech or thinking that is essentially incomprehensible to others because words or phrases are joined together without a logical or meaningful connection.



NEGATIVE SYMPTOMS **NEGATIVE SYMPTOMS**

FOR ANY NEGATIVE SYMPTOMS CODED "3," DETERMINE WHETHER THE SYMPTOM IS DEFINITELY PRIMARY OR WHETHER IT IS POSSIBLY OR DEFINITELY SECONDARY, I.E., RELATED TO ANOTHER MENTAL DISORDER (E.G., DEPRESSION), A SUBSTANCE OR A GENERAL MEDICAL CONDITION (E.G., MEDICATION-INDUCED AKINESIA), OR TO A PSYCHOTIC SYMPTOM (E.G., COMMAND HALLUCINATIONS NOT TO MOVE).

IF UNKNOWN: How do you spend your time?

Avolition: An inability to initiate and persist in goal directed activities. When severe enough to be considered pathological, avolition is pervasive and prevents the person from completing many different types of activities (e.g., work, intellectual pursuits, self-care).

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Consider ***Psychotic Disorder due to GME***

Primary

Alogia: Impoverishment in thinking that is inferred from observing speech and language behavior. There may be restriction in the amount of spontaneous speech and brief and concrete replies to questions (poverty of speech). Sometimes the speech is adequate in amount but conveys little information because it is overconcrete, overabstract, repetitive, or stereotyped (poverty of content).

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Consider ***Psychotic Disorder due to GME***

Primary

Affective flattening: Absence or near absence of any signs of affective expression.

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Consider ***Psychotic Disorder due to GME***

Primary

IF ANY DELUSIONS OR HALLUCINATIONS, NOTE DATES AND WHETHER PRESENT DURING PAST MONTH (E.G., "BIZARRE DELUSIONS, INTERMITTENTLY SINCE 1969 AND PERSISTENTLY FOR PAST SIX MONTHS"). Check here if within past month _____
DATES: