



NATIONAL VIETNAM VETERANS READJUSTMENT STUDY

Research Triangle Institute

Contractual Report of Findings from the National Vietnam Veterans Readjustment Study

Volume IV: Clinical Interview Questionnaires

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16. Abstract (Limit: 200 words) REFLECTING ON THE MORE THAN FOUR YEAR LIFE OF THE NATIONAL VIETNAM VETERANS READJUSTMENT STUDY EVOKES IN US A KALEIDOSCOPE OF MEMORIES AND THEIR ASSOCIATED EMOTIONS. CONDUCT OF THE READJUSTMENT STUDY HAS IN SOME WAYS RECAPITULATED THE VIETNAM ERA. THE STUDY WAS CONDUCTED UNDER CONTRACT NUMBER V101(93)P-1040 FROM THE VETERANS ADMINISTRATION (VA). TO ACHIEVE THE OBJECTIVES SET FORTH IN THE CONGRESSIONAL MANDATE, THIS STUDY WAS CARRIED OUT BY STAFF FROM A CONSORTIUM OF ORGANIZATIONS. THE NEED FOR BROAD-BASED INPUT INTO THE DESIGN AND OPERATION OF THE STUDY RESULTED FROM THE CONFLEUNCE OF SEVERAL FACTORS: THE SCIENTIFIC COMPLEXITY OF THE STUDY'S SUBJECT MATTER: THE POTENTIAL POLITICAL AND PROGRAMMATIC IMPLEMENTATIONS OF THE FINDINGS: AND THE INTENSE AND GENUINE EMOTIONAL INVESTMENT OF SOME IN THEIR BELIEFS ABOUT VIETNAM VETERANS, DESPITE THE SOMETIMES NON-SYSTEMATIC BASIS OF THOSE BELIEFS. THE EXECUTIVE SUMMARY IS PROVIDED IN THREE PARTS. IN PART A, HIGHLIGHTS OF SOME MAJOR FINDINGS ARE PROVIDED IN BRIEF SUMMARY FORM. IN PART B, STUDY FINDINGS FROM THE VARIOUS CHAPTERS OF THE REPORT ARE INTEGRATED TO ADDRESS DIRECTLY THE SPECIFIC ISSUES RAISED IN PUBLIC LAW 98-160, THE ENABLING LEGISLATION FOR THE NATIONAL VIETNAM VETERANS READJUSTMENT STUDY. PART C PROVIDES A CHAPTER BY CHAPTER SUMMARY OF THE ENTIRE REPORT, WHICH IS FOUR VOLUMES.		14.	
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STRUCTURED CLINICAL INTERVIEW FOR DSM-III-R - NON-PATIENT VERSION

SCID - NP - V

Robert L. Spitzer, M.D., Janet B.W. Williams, D.S.W.,
and Miriam Gibbon, M.S.W.

1. Respondent I.D. _____

2. Interviewer Name _____

3. RECORD BEGINNING DATE AND TIME: / : A.M.
MINUTE P.M.

MONTH DAY HOUR

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for DSM-III - Non-patient Version (SCID-NP-V 2-1-87)
Biometrics Research Department
New York State Psychiatric Institute
722 West 168th Street
New York, New York 10032

SCID-NP SUMMARY SCORE SHEET

DSM-III-R Axis V: Global Assessment of Functioning

1. Consider psychological, social, and occupational functioning on a hypothetical continuum of mental health-illness. Do not include impairment in functioning due to physical (or environmental) limitations.

Circle appropriate code for the week of poorest functioning in past month.

	<u>CODE</u>
Good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns, absent or minimal symptoms (e.g., mild anxiety before an exam, an occasional argument with family member)	09
No more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in school work); if symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument)	08
Some difficulty in social, occupational, or school functioning, but generally functioning pretty well, has some meaningful interpersonal relationships OR some mild symptoms (e.g., depressed mood and mild insomnia, occasional truancy, or theft within the household)	07
Moderate difficulty in social, occupational, or school functioning OR moderate symptoms (e.g., few friends and conflicts with peers, flat affect and circumstantial speech, occasional panic attacks)	06
Any serious impairment in social, occupational, or school functioning OR serious symptoms (e.g., no friends, unable to keep a job, suicidal ideation, severe obsessional rituals, frequent shoplifting)	05
Major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school) OR some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant)	04
Inability to function in almost all areas (e.g., stays in bed all day; no job, home, or friends) OR behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometimes incoherent, acts grossly inappropriately, suicidal preoccupation)	03
Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death, frequently violent, manic excitement) OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute)	02
Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicide act with clear expectation of death	01

SCID-NP SUMMARY SCORE SHEET

2. Duration of interview (minutes):

--	--	--

Diagnosis	A Lifetime Prevalence Diagnostic Index				B Meets Symptomatic Dx. Crit. Past Month	
	Inad- equata Info.	Ab- sent	Abuse	Depen- dence	Ab- sent	Pre- sent
3. Alcohol	DK	01	02	03 ----->	01	03
4. Sedative-Hypnotic- Anxiolytic	DK	01	02	03 ----->	01	03
5. Cannabis	DK	01	02	03 ----->	01	03
6. Stimulant	DK	01	02	03 ----->	01	03
7. Opioid	DK	01	02	03 ----->	01	03
8. Cocaine	DK	01	02	03 ----->	01	03
9. Hall. PCP	DK	01	02	03 ----->	01	03
10. Poly	DK	01	02	03 ----->	01	03
11. Other	DK	01	02	03 ----->	01	03

4-1-87

Diagnosis	A				B	
	Lifetime Prevalence Diagnostic Index				Meets Symptomatic Dx. Crit. Past Month	
	Inad- equately info.	Ab- sent	Sub- thresh- old	Thresh- old	Ab- sent	Pre- sent

MOOD DISORDERS
(A and D)

12.	Bipolar	DK	01	02	03	----->	01	03
13a.	current episode (most recent episode, past month)							
	01	manic						
	02	depressed						
	03	mixed						
13b.	01	mild						
	02	moderate						
	03	severe, without psychotic features						
	04	with mood-congruent psychotic features						
	05	with mood-incongruent psychotic features						
14.	Other Bipolar Disorder (Bipolar Disorder NOS)	DK	01	02	03	----->	01	03

Diagnosis	A				B	
	<u>Lifetime Prevalence Diagnostic Index</u>				<u>Meets Symptomatic Dx. Crit. Past Month</u>	

Inad- equates info.	Ab- sent	Sub- thresh- old	Thresh- old	Ab- sent	Pre- sent
---------------------------	-------------	------------------------	----------------	-------------	--------------

MOOD DISORDERS
(A and D) (cont'd)

15. Major Depression DK 01 02 | 03 |-----> 01 03

16. - |
- | 01 | mild
 - | 02 | moderate
 - | 03 | severe, without psychotic features
 - | 04 | with mood-congruent psychotic features
 - | 05 | with mood-incongruent psychotic features

17. Dysthymic Disorder (current only) DK 01 02 03

18. - |
- | 01 | primary
 - | 02 | secondary

19. Depressive Disorder NOS DK 01 02 | 03 |-----> 01 03

Diagnosis	A				B	
	<u>Lifetime Prevalence Diagnostic Index</u>				<u>Meets Symptomatic Dx. Crit. Past Month</u>	

Inad- equates info.	Ab- sent	Sub- thresh- old	Thresh- old	Ab- sent	Pre- sent
---------------------------	-------------	------------------------	----------------	-------------	--------------

ANXIETY DISORDERS (F)

20. PTSD DK 01 02 | 03 |-----> 01 03

21. Panic Disorder DK 01 02 | 03 |-----> 01 03

22. - | current episode
- | 01 | without Agoraphobia
 - | 02 | with Agoraphobia

Diagnosis	A				B	
	Lifetime Prevalence Diagnostic Index				Meets Symptomatic Dx. Crit. Past Month	
	Inad- equates info.	Ab- sent	Sub- thresh- old	Thresh- old	Ab- sent	Pre- sent
23. Agoraphobia without History of Panic Disorder (AWOPD)	DK	01	02	03 ----->	01	03
24. Social Phobia	DK	01	02	03 ----->	01	03
25. Simple Phobia	DK	01	02	03 ----->	01	03
26. Obsessive Compulsive	DK	01	02	03 ----->	01	03
27. Generalized Anxiety (current only)	DK	01	02	03		
SOMATOFORM DISORDERS (6)						
28. Somatization Disorder (current only)	DK	01	02	03		
29. Hypochondriasis (current only)	DK	01	02	03		
30. Undifferentiated Somatoform Disorder (current only)	DK	01	02	03		
31. Adjustment Disorder (I) (current only)	DK	01	02	03		
31a. Subtype	<input type="checkbox"/>		<input type="checkbox"/>			
32. Antisocial Personality Disorder	DK	01	02	03		
33. Other DSM-III-R AXIS I Disorder (not covered by SCID)	DK	01	02	03		
33a. Specify other disorder(s):	_____					

34. Principal Axis I Diagnosis (i.e., the disorder that should be the main focus of clinical attention:

Enter name of principal disorder _____

--	--

INTERVIEWER'S CONFIDENCE IN ACCURACY OF SCID:

How confident are you that the SCID diagnoses for this respondent are accurate? Below, please rate your level of confidence that the SCID accurately detected the presence or absence of the following disorders for this respondent.

	<u>Low</u>	<u>Moderate</u>	<u>High</u>
35. Mood Disorders	01	02	03
36. Psychoactive Substance Use Disorders	01	02	03
37. PTSD	01	02	03
38. Anxiety Disorders (other than PTSD)	01	02	03
39. Somatoform Disorders	01	02	03
40. Adjustment Disorder	01	02	03
41. Antisocial Personality Disorder	01	02	03

INTERVIEWER'S DIAGNOSES, IF DIFFERENT FROM SCID DIAGNOSES:

- 42. _____

--	--
- 43. _____

--	--
- 44. _____

--	--

STRESS RESPONSE RATING SCALE

DIRECTIONS: PLEASE JUDGE THE DEGREE TO WHICH THE FOLLOWING 40 SIGNS AND SYMPTOMS DESCRIBE THE RESPONDENT NOW (E.G., IN THE PAST 7 DAYS). DO NOT SPEND TOO MUCH TIME DECIDING ABOUT ANY ONE ITEM. BASE YOUR JUDGMENTS ON EITHER THE HISTORY AS REPORTED OR YOUR OWN OBSERVATIONS. CIRCLE THE APPROPRIATE RESPONSE FOR EACH ITEM. IF YOU HAVE ABSOLUTELY NO INFORMATION FOR A PARTICULAR ITEM, AND THE NOT PRESENT RESPONSE MIGHT INACCURATELY DESCRIBE THE SUBJECT'S CONDITION, THEN USE THE NO INFORMATION RESPONSE, BUT USE IT SPARINGLY.

	NO INFORMATION	NOT PRESENT	MINOR	MODERATE	
45. HYPERVIGILANCE - Excessively alert, overly scanning the surrounding environment, overly aroused in perceptual searching, tensely expectant.....	DK	01	02	03	(
46. STARTLE REACTIONS - Flinching after noises, unusual orienting reactions, blanching or otherwise reacting to stimuli that usually do not warrant such responses.....	DK	01	02	03	(
47. ILLUSIONS OR MISPERCEPTIONS - A misappraisal of a person, object, or scene as something or someone else (e.g., a bush is seen for a moment as a person; a person is misrecognized as someone else).....	DK	01	02	03	(
48. INTRUSIVE THOUGHTS OR IMAGES WHEN TRYING TO SLEEP - Unwelcome and unbidden mental contents that may be difficult to dispel; include trains of thought that begin volitionally but develop an out-of-control quality.....	DK	01	02	03	(
49. BAD DREAMS - Any dreams experienced as unpleasant, not just the classical nightmare with anxious awakenings.....	DK	01	02	03	(
50. HALLUCINATIONS, PSEUDOHALLUCINATIONS - An emotional reaction to imagined stimuli, experienced as if it were real, regardless of the person's belief in its reality. "Felt presences" of others as well as sensations of smell, taste, touch, movement, sound and vision are included, along with out-of-body experiences.....	DK	01	02	03	(
51. INTRUSIVE IMAGES WHILE AWAKE - Unbidden sensations which occur in a nonvolitional manner either in visual or other sensory systems. Awareness of these images is unwanted and occurs suddenly.....	DK	01	02	03	(

STRESS RESPONSE RATING SCALE

	NO INFORMATION	NOT PRESENT	MINOR	MODERATE	MAJOR
52. INTRUSIVE THOUGHTS OR FEELING WHILE AWAKE - Unwilled entries of simple ideas or trains of thought and feeling taking unwilled directions.	DK	01	02	03	04
53. PEENACTMENTS - Any behavior that repeats any aspects of the serious life event, from minor tic-like movements and gestures to acting out in major movements and sequences, including retelling the event. Repeated enactments of personal responses to the life event, whether or not they actually occurred at the time of the event.....	DK	01	02	03	04
54. RUMINATION OR PREOCCUPATION - Continuous conscious awareness about the event and associations to the event that go beyond ordinary thinking through. They key characteristic is a sense of uncontrolled repetition.....	DK	01	02	03	04
55. DIFFICULTY IN DISPELLING THOUGHTS AND FEELINGS - Once a thought or feeling has come to mind, even if it was deliberate, awareness of it cannot be stopped.....	DK	01	02	03	04
56. FANGS OF EMOTION - A wave of feeling that increases and then decreases rather than remaining constant.....	DK	01	02	03	04
57. FEARS OR SENSATIONS OF LOSING BODILY CONTROL - Sensations of urinating, vomiting, or defecating without will, fear of suffocating, fear of being unable to control voluntary behavior as well as somatic responses such as sweating, diarrhea, tachycardia.....	DK	01	02	03	04
58. INATTENTION, DAZE - Staring off into space, failure to determine the significance of stimuli, flatness of response to stimuli.....	DK	01	02	03	04
59. MEMORY FAILURE - Inability to recall expectable details, sequences of event, or specific events.	DK	01	02	03	04
60. LOSS OF TRAIN OF THOUGHT - Temporary or momentary lapses in continuation of a communication, or report of inability to concentrate on a train of thought.....	DK	01	02	03	04
61. NUMBNESS - Sense of not having feelings, or being "benumbed." (Note: Either patient report or your inference is acceptable here)..	DK	01	02	03	04

STRESS RESPONSE RATING SCALE

	NO INFORMATION	NOT PRESENT	MINOR	MODERATE
62. SENSE OF UNREALITY - Experiences of depersonalization, derealization, or altered sense of time and place.....	DK	01	02	03
63. WITHDRAWAL - Feelings or actions indicating social isolation or experiences of being isolated and detached.....	DK	01	02	03
64. MISDIRECTION OF FEELINGS - Displacement of positive or negative feelings.....	DK	01	02	03
65. EXCESSIVE USE OF ALCOHOL OR DRUGS - Avoidance of implications of the event by increased usage. Alcohol: excessive usage. Drugs: abuse of prescription agents, as well as abuse of other drugs, legal and illegal.....	DK	01	02	03
66. INHIBITION OF THINKING - attempts to block thinking about the event. Success or awareness of the attempt is not a consideration.....	DK	01	02	03
67. UNREALISTIC DISTORTION OF MEANINGS - Effects of the event on day-to-day living are inaccurately appraised.....	DK	01	02	03
68. EXCESSIVE SLEEPING - Avoidance of implications of the event by increased sleeping as well as by simply staying in bed.....	DK	01	02	03
69. AVOIDANCE OF REMINDERS - Staying away from certain places, foods, or activities; avoiding photographs or other mementos.....	DK	01	02	03
70. SEEKING OF DISTRACTING STIMULATION OR ACTIVITY - Avoidance of the implications of the event by seeking excessive exposure to external stimuli or activities such as television, loud music, fast driving, sexual activity, voracious reading, or other diversions.....	DK	01	02	03
71. HYPERACTIVITY - Fidgeting, markedly increased pace of activity, inability to slow down or stop sequences of actions; periods of frenzied activity.....	DK	01	02	03
72. RETARDED PACE OF ACTIONS - Psychomotor retardation; clear slowing, either continuous or episodic, of thought or behavior.....	DK	01	02	03

STRESS RESPONSE RATING SCALE

	NO INFORMATION	NOT PRESENT	MINOR	MODERATE	MAJOR
73. TREMORS OR TICS - Tremors or tics, including tics about the eyes and mouth. (Note: Basis of tremor or tic as neurological or characterological is irrelevant)....	DK	01	02	03	04
74. CLUMSINESS OR CARELESSNESS - Dropping objects, bumping into furniture, actions that are more than awkward.....	DK	01	02	03	04
75. AUTONOMIC HYPERAROUSAL - sweating, palpitations, frequent urination, altered skin color, altered pupil size, or other autonomic signs..	DK	01	02	03	04
76. TROUBLED SLEEP - Inability to fall and stay asleep; bad feelings about or during sleep....	DK	01	02	03	04
77. RESTLESSNESS OR AGITATION - Report of inner sensations of agitation or action and behavior which is restless or agitated.....	DK	01	02	03	04
78. EXCITED STATES - Thought and action is dominated by excessively high rate of arousal, information processing, and expression. May include excessively high levels of sexuality, creativity, productivity, exercise.....	DK	01	02	03	04
79. SELF-HATRED - Uncontrollable suicidal pre-occupation or gestures, self-loathing, or hostility towards a part of the body.....	DK	01	02	03	04
80. RAGE AT OTHERS - Uncontrollable hostility and anger, even if the target is unclear.....	DK	01	02	03	04
81. PANIC OR DISINTEGRATION - Periods of high pressure, confusion, chaos, anxiety, and purposelessness.....	DK	01	02	03	04
82. SADNESS - Uncontrollable sadness or grief; floods of despair, longing, pining, or hopelessness.....	DK	01	02	03	04
83. GUILT OR SHAME - Out-of-control experience of remorse, sense of wrongdoing, or exposure of personal evil or defectiveness.....	DK	01	02	03	04
84. IRRITABILITY OR TOUCHINESS - Relations with peers, children, or strangers that are either inwardly irritating or outwardly abrupt, hostile, and bristling.....	DK	01	02	03	04

SCID-NP-V 4-1-87

Overview

INTRODUCTION

I'm going to be asking you about problems or difficulties you may have had, and I'll be making some notes as we go along. Do you have any questions before we begin?

I'd like to start with some basic information about you.

1. DEMOGRAPHIC DATA

a. Sex (BY OBSERVATION!)

SEX: 01 male
02 female

b. How old are you?

AGE:

c. Are you married?

IF NO: Were you ever?

(Any children?)

MARITAL STATUS (most recent):
01 married (or living together 1+ years)
02 separated
03 divorced/annulled
04 widowed
05 never married

d. Where do you live?

e. Who do you live with?

f. What kind of work do you do?
(Do you work outside of your home?)

g. Are you working now?

-> IF YES: How long have you worked there?

IF LESS THAN 6 MONTHS: Why did you leave your last job?

Have you always done that kind of work?

-> IF NO: Why is that? What kind of work have you done?

h. Has there ever been a period of time when you were unable to work or go to school?

IF YES: When? Why was that?

IF NOT OBVIOUS FROM WORK HISTORY:

i. How far did you get in school?

IF FAILED TO COMPLETE A PROGRAM IN WHICH THEY WERE ENROLLED: Why didn't you finish?

2. BRIEF OVERVIEW OF LIFETIME ADJUSTMENT.

a. Have you ever seen anybody for emotional or psychiatric problems?

Treatment for emotional problems with a physician or mental health professional

NO 01
YES 03

IF YES: What was that for? (What treatment did you get? Any medication?)

IF NO: Was there ever a time when you, or someone else, thought you should see someone because of the way you were feeling or acting?

b. Have you ever been a patient in a psychiatric hospital?

Hospitalized for emotional problems

NO 01
YES 03

IF YES: What was that for?

IF GIVES AN INADEQUATE ANSWER, CHALLENGE GENTLY:
e.g., "Wasn't there something else? People usually don't go to psychiatric hospitals just because they are tired or nervous."

c. IF NO EVIDENCE OF PAST PSYCHOPATHOLOGY: Thinking back over your whole life, when were you the most upset?

(Why? What was that like? How were you feeling?)

d. When were you feeling the best you have ever felt?

(Were you feeling so good that other people were worried about you?)

3. BRIEF OVERVIEW OF CURRENT ADJUSTMENT (PAST YEAR)

a. Now I would like to ask you about the past year. How have things been going for you?

b. Has anything happened that has been especially hard for you?

c. What about difficulties at work or with your family?

d. How has your mood been?

e. What about your physical health? (Do you take any medications now?) USE INFORMATION TO CODE AXIS III.

LIFE CHART
(FOR INTERVIEWER'S CONVENIENCE)

Age (or date)	Life Event	Symptoms	Treatment
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

f. What have your drinking habits been like? _____

g. Have you taken any drugs? _____
(What about marijuana, cocaine, other street drugs?)

IF RESPONDENT REPORTS CURRENT PSYCHOPATHOLOGY ASK h and i, OTHERWISE SKIP TO PRELIMINARY DIAGNOSTIC IMPRESSION (Item 4 on this page).

ENVIRONMENTAL CONTEXT AND POSSIBLE PRECIPITANTS

h. What was going on in your life when this (CURRENT PSYCHOPATHOLOGY) began? _____

i. Did anything happen or change just before all this started? (Do you think this had anything to do with your [CURRENT PROBLEMS])? _____

4. PRELIMINARY DIAGNOSTIC IMPRESSION (AXIS II OPTIONAL): _____

(E.G., "possible mood disorder", "no Axis I or Axis II disorder", etc.) _____

PSYCHOACTIVE SUBSTANCE DEPENDENCE AND ABUSE

ALCOHOL DEPENDENCE OR ABUSE CRITERIA
(LIFETIME)

- What are your drinking habits like? (How much do you drink?)
- Was there ever a period in your life when you drank too much? (Has alcohol ever caused problems for you?)

IF YES: What problems did it cause?

- Has anyone ever objected to your drinking?

IF YES: Why?

IF NO SUGGESTION THAT EVER DRANK ALCOHOL EXCESSIVELY OR HAD ALCOHOL-RELATED PROBLEMS, CHECK HERE AND SKIP TO E.6 (NON-ALCOHOL PSDA) _____ ← - - INTERVIEWER CHECKPOINT

- When in your life were you drinking the most?

(How long did it last?)

- Now I am going to ask you several questions about that time.

IF CAN'T IDENTIFY A PARTICULAR PERIOD, REPHRASE EACH QUESTION TO BEGIN WITH "Have you ever..."

A. At least three of the following:

- | | | | | | |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----|----|----|----|
| 1. Did you often spend a lot of time making sure that you had alcohol available or thinking about drinking? | (1) When not actually using alcohol, a lot of time spent looking forward to use of or arranging to get alcohol | DK | 01 | 02 | 03 |
| 2. Did you often find that when you started drinking you ended up drinking much more than you thought you would? | (2) Alcohol often taken in larger amounts or over a longer period than the individual intended | DK | 01 | 02 | 03 |

IF NO: What about drinking for a much longer period of time than you thought you would?

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

- | | | | | | | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|----|
| 3. | <p>Did you find that you needed to drink a lot more in order to get high than you did when you first started drinking?</p> <p>IF NO: What about finding that when you drank the same amount, it had much less effect than before?</p> | (3) Tolerance: need for increased amounts of alcohol in order to achieve intoxication or desired effect, or diminished effect with continued use of the same amount | DK | 01 | 02 | 03 |
| 4. | <p>Did you ever have the shakes when you cut down or stopped drinking (that is, your hands shook so much that other people would have been able to notice it)?</p> | (4) Characteristic withdrawal symptoms, such as coarse tremor ("shakes"), seizures, DTs. (Do not include simple "hangover.") | DK | 01 | 02 | 03 |
| 5. | <p>IF HAD WITHDRAWAL SXS: After not drinking for a few hours or more, did you often drink to keep yourself from getting the shakes or becoming sick?</p> <p>IF NO: What about drinking when you were having the shakes or feeling sick so that you would feel better?</p> | (5) Alcohol often taken to relieve or avoid withdrawal symptoms | DK | 01 | 02 | 03 |
| 6. | <p>Did you try to cut down or stop drinking alcohol?</p> <p>IF YES: Did you ever actually stop drinking altogether?</p> <p>(How many times did you try to cut down or stop altogether?)</p> <p>IF NO: Did you want to stop or cut down?</p> <p>IF YES: Is this something you kept worrying about or was it just a passing concern?</p> | (6) Persistent desire or repeated efforts to cut down or control alcohol use | DK | 01 | 02 | 03 |

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

7. Did you have a time when you were often intoxicated or high or very hungover, when you were doing something important, like being at school or work, or taking care of children?

IF NO: What about missing something important, like staying away from school or work or missing an appointment because you were intoxicated, high or very hungover?

(Did you ever drink while doing something where it was dangerous to drink at all?)

(7) Frequent intoxication or impairment by alcohol use when expected to fulfill social or occupational obligations, or when alcohol use is hazardous (e.g., doesn't go to work because hungover or high, goes to work high, drives when drunk)

DK 01 02 03

8. Did you drink so often that you started to drink instead of working or spending time at hobbies or with your family or friends?

(8) Important social, occupational, or recreational activity given up or reduced because it was incompatible with the use of alcohol

DK 01 02 03

9. IF NOT ALREADY KNOWN: Did your drinking cause problems with other people, such as with family members or people at work?

IF NOT ALREADY KNOWN: Did your drinking cause psychological problems, like making you depressed?

IF NOT ALREADY KNOWN: Did your drinking ever cause physical problems or make a physical problem worse?

(9) Continued alcohol use despite a persistent social, occupational, psychological, or physical problem that is caused or exacerbated by the use of alcohol

DK 01 02 03

IF YES TO ANY OF ABOVE: Did you keep on drinking anyway?

INTERVIEWER CHECKPOINT: IF NO "A" ITEMS ARE CODED "03," CHECK HERE AND GO TO NON-ALCOHOL PSDA, E. 6 ____.

10. IF UNCLEAR: For how long a time were you having (SXS OF ALCOHOL DEPENDENCE OR ABUSE)?

B. Some symptoms of the disturbance have persisted for at least one month, or have occurred repeatedly over a longer period of time.

DK 01 03

GO TO NON-ALC. PSDA, E. 6

11.

Alcohol Dependence: At least 3 "A" items are coded "03"

Alcohol Abuse: Does not meet criteria for Dependence but does meet either (1) or (2) below:

(1) continued use despite a persistent social, occupational, psychological, or physical problem that is caused or exacerbated by use of alcohol

(2) recurrent use in situations when use is hazardous (e.g., driving while intoxicated)

Neither Dependence nor Abuse (unlikely if you got this far!)

DK 01 02 03

GO TO NON-ALC. PSDA, E. 6

CHRONOLOGY

12. IF UNCLEAR: During the past month, have you had (LIST OF ALCOHOL DEPENDENCE SXS CODED "3")? Has met criteria for Alcohol Dependence or Abuse during past month DK 01 03

13. When did you last have problems with alcohol? Number of months prior to interview when last met criteria for Alcohol Dependence or Abuse (SKIP NEXT ITEM)

NOTE CURRENT SEVERITY OF ALCOHOL DEPENDENCE (WORST WEEK OF PAST MONTH):

14. (Additional questions regarding alcohol use during the worst week of the past month and effect on social and occupational functioning may be necessary.)

Mild: Few, if any, symptoms in excess of those required to make the diagnosis AND symptoms result in only mild impairment in occupational functioning or in usual social activities or relationships with others Mild = 01

Moderate: Symptoms or functional impairment intermediate between "mild" and "severe" Moderate = 02

Severe: Many symptoms in excess of those required to make the diagnosis AND symptoms markedly interfere with occupational functioning or with usual social activities or relationships with others Severe = 03

15. During the past five years, how much of the time have you had problems with alcohol? Duration in months during past five years that any symptoms of Alcohol Dependence or Abuse were present

16. How old were you when you first had (LIST OF ALCOHOL DEPENDENCE SXS CODED "3")? Age at onset of Alcohol Dependence or Abuse

NON-ALCOHOLIC PSYCHOACTIVE
SUBSTANCE DEPENDENCE AND ABUSE
(LIFETIME)

Now I am going to ask you about
your use of drugs or medicines.

SCREENING FOR DRUG USE:

Either (1), (2), or (3):

SHOW DRUG LIST TO SUBJECT.

17. Have you ever taken any of
these to get high, to sleep
better or to change your
mood?

IF A DRUG THAT IS SOMETIMES
PRESCRIBED: Was that pre-
scribed or did you take it
on your own?

IF PRESCRIBED: Did you take
more than was prescribed?
Did you ever get hooked
(become dependent) on a drug
that was prescribed for you?

IF EVER HAS TAKEN ANY OF
THESE DRUGS ON OWN OR MORE
THAN WAS PRESCRIBED OR BE-
CAME DEPENDENT: Have you
taken these more than five
times (on your own)? Have
you used marijuana more
than twenty times? (Have
you ever used any of these
drugs nearly every day for
more than a week?)

(1) has used cannabis more
than twenty times, or nearly
every day for more than a
week

(2) has taken other non-
alcoholic drug(s) on his or
her own (or more than was
prescribed), to sleep or to
alter mood or thinking, more
than five times or nearly
every day for more than a
week

(3) reports becoming
dependent on a prescribed
drug

DK 01 02

GO TO
NEXT
MODULE

CHECK DRUG CLASS AT OR ABOVE
SCREENING THRESHOLD AND NOTE
SPECIFIC DRUG USED

SPECIFIC DRUG USED ("MULTIPLE" IF
A VARIETY OF DRUGS WITHIN A CLASS)

18. _____ Sedatives-hypnotics-anxiolytics
(e.g., quaalude, seconal, valium,
librium, "downers")

19. _____ Cannabis (e.g., marijuana, THC,
"grass," "weed," "reefer," "pot,"
hashish)

20. _____ Stimulants (e.g., amphetamine,
"speed," "uppers")

DK = inadequate information -01=absent or false 02=subthreshold 03=threshold or tr

Sedatives-hypnotics (e.g., quaalude, seconal, valium, librium,
"downers")

Cannabis (e.g., marijuana, THC, "grass," "weed," "reefer," "pot")

Stimulants (e.g., amphetamine, "speed," "uppers")

Opioids (e.g., heroin, morphine, methadone, darvon, opium,
codeine, demerol, percodan)

Cocaine ("coke")

Hallucinogens-PCP (e.g., LSD, "acid, mescaline, peyote,
psilocybin, STP, "angel dust," "peace pill")

Other (e.g., steroids, "glue," nonprescription diet and sleeping
pills)

	DRUG CLASS	SPECIFIC DRUG USED ("MULTIPLE" IF A VARIETY OF DRUGS WITHIN A CLASS)
21. _____	Opioids (e.g., heroin, morphine, methadone, darvon, opium, codeine, demerol, percodan)	_____
22. _____	Cocaine ("coke," "crack")	_____
23. _____	Hallucinogens-PCP (e.g., LSD, "acid," mescaline, peyote, psilocybin, PCP, "angel dust," "peace pill")	_____
24. _____	Other (e.g., steroids, "glue," nonprescription diet and sleeping pills)	_____

INQUIRE ABOUT POLY DRUG USE:

Was there a period of at least six months when you were using a lot of different drugs, with or without alcohol (other than tobacco), and not mainly one drug?

IF YES, USE POLY COLUMN BELOW FOR POLY DRUG USE.

ASK ABOUT EACH ITEM ACROSS THE DRUG CATEGORIES CHECKED ABOVE. CODE "01," "02" OR "03." QUESTIONS SHOULD BE FOCUSED ON THE TIME PERIOD WHEN THE SUBJECT WAS TAKING THE LARGEST AMOUNTS OF THE DRUG.

A. At least three of the following:

Did you often spend a lot of time making sure that you had (DRUG) available or thinking about using (DRUG)?

	25.	26.	27.	28.	29.	30.	31.	32.
	SED.-							
	HYPN.-	CANN	STIMU	OPI	COCA	HALL-		
	ANX.	ABIS	LANTS	IDS	INE	PCP	POLY	C
a. (1) When not actually using drug, a lot of time spent looking forward to use of or arranging to get drug	01	01	01	01	01	01	01	01
	02	02	02	02	02	02	02	02
	03	03	03	03	03	03	03	03

Non-Alcohol

PSDA E. 8

25.	26.	27.	28.	29.	30.	31.	32.
SED.- HYPN.- ANX.	CANN ABIS	STIMU LANTS	OPI OIDS	COCA INE	HALL- PCP	POLY	OTHEP

Did you often find that when you started using (DRUG) you ended up taking much more of it than you thought you would?

IF NO: What about using it over a much longer period of time than you thought you would?

b.	(2) Drug often taken in larger amounts or over a longer period than the individual intended	01	01	01	01	01	01	01	01
		02	02	02	02	02	02	02	02
		03	03	03	03	03	03	03	03

Did you find that you needed to use a lot more (DRUG) in order to get high than you did when you first started taking it?

IF NO: What about finding that when you used the same amount, it had much less effect than before?

c.	(3) Tolerance: need for increased amounts of drug in order to achieve intoxication or desired effect, or diminished effect with continued use of the same amount	01	01	01	01	01	01	01	01
		02	02	02	02	02	02	02	02
		03	03	03	03	03	03	03	03

Have you ever had withdrawal symptoms, that is, felt sick when you cut down or stopped using (DRUG)?

IF YES: What symptoms did you have? IF UNCLEAR WHETHER SYMPTOMS REPRESENT WITHDRAWAL, CONSULT DSM-III-R CRITERIA FOR WITHDRAWAL SYNDROMES

d.	(4) Characteristic withdrawal symptoms	01	01	01	01	01	01	01	01
		02	02	02	02	02	02	02	02
		03	03	03	03	03	03	03	03

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

	25.	26.	27.	28.	29.	30.	31.	32.
	SED.- HYPN.- ANX.	CANN ABIS	STIMU LANTS	OPI OIDS	COCA INE	HALL- PCP	POLY	OTHE
<p>IF HAD WITHDRAWAL SXS: After not using (DRUG) for a few hours or more, did you often use it or some other drug to keep yourself from getting sick (WITHDRAWAL SXS)? What about using (DRUG) when you were feeling sick (WITHDRAWAL SXS) so that you would feel better?</p>								
e. (5) Drug often taken to relieve or avoid withdrawal symptoms	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03
<p>Did you try to cut down or stop using (DRUG)?</p> <p>IF YES: Did you ever actually stop taking (DRUG) altogether?</p> <p>(How many times did you try to cut down or stop altogether?)</p> <p>IF NO: Did you want to stop or cut down?</p> <p>IF YES: Is this something you kept worrying about or was it just a passing concern?</p>								
f. (6) Persistent desire or repeated efforts to cut down or control drug use	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	01 02 03	0 0 0

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

	25.	26.	27.	28.	29.	30.	31.	32.
SED.-								
HYPN.-								
ANX.	CANN	STIMU	OPT	COCA	HALL-			
	ABIS	LANTS	OIDS	INE	PCP	POLY	OTHER	

Did you have a time when you were often intoxicated or high from (DRUG) when you were doing something important, like being at school or work, or taking care of children?

IF NO: What about missing something important, like staying away from school or work or missing an appointment because you were intoxicated or high?

(Did you ever use [DRUG] while doing something where it was dangerous to take [DRUG] at all?)

g. (7) Frequent intoxication or impairment by drug use when expected to fulfill social or occupational obligations, or when substance use is hazardous (e.g., doesn't go to work because high, goes to work high, drives when intoxicated)	01	01	01	01	01	01	01	01
	02	02	02	02	02	02	02	02
	03	03	03	03	03	03	03	03

Did you use (DRUG) so often that you started to use (DRUG) instead of working or spending time at hobbies or with your family or friends?

h. (8) Important social, occupational, or recreational activity given up or reduced because it was incompatible with the use of the drug	01	01	01	01	01	01	01	01
	02	02	02	02	02	02	02	02
	03	03	03	03	03	03	03	03

25.	26.	27.	28.	29.	30.	31.	32.
SED.-							
HYPN.-	CANN	STIMU	OPT	COCA	HALL-		
ANX.	ABIS	LANTS	OIDS	INE	PCP	POLY	OTI

IF NOT ALREADY KNOWN: Did your (DRUG) use cause problems with other people, such as with family members or people at work?

IF NOT ALREADY KNOWN: Did your drinking cause psychological problems, like making you depressed?

IF NOT ALREADY KNOWN: Did your (DRUG) use ever cause physical problems or make a physical problem worse?

IF YES TO ANY OF THE ABOVE: Did you keep on using (DRUG) anyway?

i. (9) Continued drug use despite a persistent social, occupational, psychological, or physical problem that is caused or exacerbated by the use of the drug	01	01	01	01	01	01	01
	02	02	02	02	02	02	02
	03	03	03	03	03	03	03

IF NO "A" ITEMS ARE CODED "03" CHECK HERE AND GO TO NEXT MODULE ____.

←-INTERVIEWER CHECKPOINT

DK 01 02

33. B. Some symptoms of the disturbance have persisted for at least one month, or have occurred repeatedly over a longer period of time.

IF UNCLEAR: For how long a time were you having (SXS OF DRUG DEPENDENCE OR ABUSE)?

	34.	35.	36.	37.	38.	39.	40.	41.
	SED.- HYPN.- ANX.	CANN ABIS	STIMU LANTS	OPI OIDS	COCA INE	HALL- PCP	POLY	OTHER
a. Dependence (At least 3 "A" items are coded "03")	03	03	03	03	03	03	03	03
Abuse (Does not meet criteria for Dependence but does meet either (1) or (2) below):	02	02	02	02	02	02	02	02
(1) continued use despite a persistent social, occupational, psychological, or physical problem that is caused or exacerbated by drug use								
(2) recurrent use in situations when use is hazardous (e.g., driving while intoxicated)								
Neither Dependence nor Abuse (unlikely if you got this far!)	01	01	01	01	01	01	01	01
Have you had problems with (ANY DRUG) during the past six months?								
IF YES: Which ones?	Y	Y	Y	Y	Y	Y	Y	Y
b. Drug problems past six months	N	N	N	N	N	N	N	N

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

CHRONOLOGY

42. IF UNCLEAR: During the past month, have you had (LIST OF NON-ALCOHOL SUBSTANCE DEPENDENCE SXS CODED "3")? Has met criteria for Non-alcohol Substance Dependence or Abuse during past month DK 01 03

43. When did you last have problems with (DRUG)? Number of months prior to interview when last met criteria for Non-Alcohol Substance Dependence or Abuse (SKIP NEXT ITEM)

NOTE CURRENT SEVERITY OF NON-ALCOHOLIC PSYCHOACTIVE SUBSTANCE DEPENDENCE (WORST WEEK OF PAST MONTH):

(Additional questions regarding substance use during the worst week of the past month and effect on social and occupational functioning may be necessary.)

- 44. Mild: Few, if any, symptoms in excess of those required to make the diagnosis AND symptoms result in only mild impairment in occupational functioning or in usual social activities or relationships with others Mild = (
- Moderate: Symptoms or functional impairment intermediate between "mild" and "severe" Moderate =
- Severe: Many symptoms in excess of those required to make the diagnosis AND symptoms markedly interfere with occupational functioning or with usual social activities or relationships with others Severe =

45. During the past five years, how much of the time have you had problems with (ANY DRUG)? Duration in months during past five years that any symptoms of Non-alcohol Substance Dependence or Abuse were present

46. How old were you when you first had (LIST OF NON-ALCOHOL SUBSTANCE DEPENDENCE CODED "3")? Age at onset of Non-alcohol Substance Dependence or Abuse

47. CIRCLE IF EVER BECAME DEPENDENT ON A PRESCRIBED DRUG No 01 Yes 03

SPECIFY DRUG: _____

MOOD SYNDROMES

IN THIS SECTION, MAJOR DEPRESSIVE, MANIC, HYPOMANIC SYNDROMES, AND DYSTHYMIA ARE EVALUATED. THE DIAGNOSES ARE MADE IN D. MOOD DISORDERS, FOLLOWING C. PSYCHOTIC DISORDERS (EXCEPT FOR DYSTHYMIA, WHICH IS DIAGNOSED IN THIS MODULE.)

CURRENT MAJOR DEPRESSIVE SYNDROME

MDS CRITERIA

Now I am going to ask you some more questions about your mood.

A. At least 5 of the following symptoms have each been present during the same two-week period; at least one of the symptoms was either (1) depressed mood, or (2) loss of interest or pleasure.

NOTE: DO NOT INCLUDE SXS THAT ARE CLEARLY DUE TO A PHYSICAL CONDITION, MOOD-INCONGRUENT DELUSIONS OR HALLUCINATIONS, INCOHERENCE OR MARKED LOOSENING OF ASSOCIATIONS.

1. In the last month...

...has there been a period of time when you were feeling depressed or down most of the day nearly every day? (What was that like?)

IF YES: How long did it last? (As long as two weeks?)

(1) depressed mood most of the day, nearly every day (either by subjective account, e.g., feels "down" or "low," or observed by others to look sad or depressed)

DK 01 02 03

2.

...what about not being interested in most things or unable to enjoy the things you used to enjoy? (What was that like?)

IF YES: Was it nearly every day? How long did it last? (As long as two weeks?)

(2) loss of interest or pleasure in all or almost all activities nearly every day (either by subjective account or observed by others to be apathetic)

DK 01 02 03

IF NEITHER ITEM (1) NOR ITEM (2) IS CODED "03," GO TO *PAST MAJ DEP SYN- DROME,* A. 5

During this time...

- | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| <p>3. ..did you lose or gain any weight? (How much?)</p> <p>IF NO: How was your appetite? (What about compared to your usual appetite? Did you have to force yourself to eat? Eat [less/more] than usual?</p> <p>Was that nearly every day?)</p> | <p>(3) significant weight loss or weight gain when not dieting or binge eating (e.g., more than 5% of body weight in a month); or decrease or increase in appetite nearly every day</p> | <p>DK 01 02 03</p> |
| <p>4. ..how were you sleeping? (Trouble falling asleep, waking frequently, trouble staying asleep, waking too early, sleeping too much? How many hours a night compared to usual? Was that nearly every night?)</p> | <p>(4) insomnia or hypersomnia nearly every day</p> | <p>DK 01 02 03</p> |
| <p>5. ..were you so fidgety or restless that you were unable to sit still? (If I had seen you, would I have noticed it? Was that nearly every day?)</p> <p>IF NO: What about the opposite -- talking or moving more slowly than is normal for you? (If I had seen you, would I have noticed it? Was that nearly every day?)</p> | <p>(5) psychomotor agitation or retardation nearly every day (observable by others and not merely subjective feelings of restlessness or being slowed down)</p> | <p>DK 01 02 03</p> |
| <p>6. ..what was your energy like? (Tired all the time? Nearly every day?)</p> | <p>(6) fatigue or loss of energy nearly every day</p> | <p>DK 01 02 03</p> |
| <p>7. ..how did you feel about yourself? (worthless?) (Nearly every day?)</p> <p>IF NO: What about feeling guilty about things you had done or not done? (Nearly every day?)</p> | <p>(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)</p> | <p>DK 01 02 03</p> |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During this time...

8. ..did you have trouble thinking or concentrating? (Nearly every day?) (8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or observed by others) DK 01 02 03

IF NO: Was it hard to make decisions about everyday things? (Nearly every day?)

9. ..were things so bad that you were thinking you would be better off dead or thinking about hurting yourself? (Nearly every day?) (9) thoughts that he or she would be better off dead, or suicidal ideation, nearly every day; a suicide attempt DK 01 02 03

(Did you do anything to hurt yourself?)

0. AT LEAST FIVE OF THE ABOVE SXS [A (1-9)] ARE CODED "03" AND AT LEAST ONE OF THESE IS ITEM (1) OR (2) 01 03

GO TO
*PAST
MAJ
DEP
SYN-
DROME,*
A. 5

ETIOLOGIC ROLE OF AN ORGANIC FACTOR IN FULL DEPRESSIVE SYNDROME

1. Just before this began, were you physically ill? (What did the doctor say?) B.(1) An organic etiology has been ruled out, i.e., either there was no new organic factor (or change in a pre-existing organic factor) that precipitated the disturbance, or the disturbance has persisted for at least one month beyond the cessation of the precipitating organic factor. DK 01 03

Were you taking any drugs or medicines? (Any change in the amount you were taking?)

Drinking a lot? (Any change?)

R/O ORG MOOD SYNDROME	NO ORG ETIOLOGY
GO TO *PAST MAJ DEP SYN-DROME,* A. 5	CONTINUE

IF YES TO ANY OF THESE QUESTIONS, DETERMINE IF THE DEPRESSIVE EPISODE WAS PRECIPITATED AND SUSTAINED BY AN ORGANIC FACTOR.

IF ORGANIC FACTOR, DESCRIBE:

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

2. IF DURATION OF DEPRESSION HAS BEEN RELATIVELY BRIEF: Did this begin soon after someone close to you died?

IF YES, DETERMINE IF ANY DEPRESSIVE EPISODE WAS NOT DUE TO UNCOMPLICATED BEREAVEMENT. IF SO, CODE "03."

B.(2) Not a normal reaction to the loss of a loved one (Uncomplicated Bereavement). (NOTE: Morbid preoccupation with worthlessness, suicidal ideation, marked functional impairment or psychomotor retardation, or prolonged duration, suggest bereavement complicated by Major Depression.)

DK 01 03

R/O UNCOMPLICATED BE- REAVE- MENT	CUR- RENT EPI- ISODE NOT DUE TO UNCOMP BE- REAVE- MENT
GO TO *PAST MAJ DEP SYN- DROME, * A. 5	

3.

MAJOR DEPRESSIVE SYNDROME CRITERIA A AND B ARE CODED "03"

01 03

GO TO *PAST MAJ DEP SYN- DROME, * A. 5	CUR- RENT MAJ DEP SYN- DROME
-------------------------------------------------------	---------------------------------------------

4. How old were you when you first had a lot of these symptoms for at least two weeks?

Age at onset of Major Depressive Syndrome

--	--

5. How many separate times were you (depressed/OWN EQUIVALENT) nearly every day for at least two weeks and had several of the symptoms that you described, like (SXS OF WORST EPISODE)?

Number of episodes of Major Depressive Syndrome (CODE 97 IF TOO NUMEROUS OR INDISTINCT TO COUNT)

--	--

GO TO *CURRENT MANIC SYNDROME, * A. 9

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

PAST MAJOR DEPRESSIVE SYNDROME

MDS CRITERIA

(IF CURRENTLY DEPRESSED BUT FAILED TO MEET FULL CRITERIA FOR CURRENT MDS, SCREEN FOR PAST MDS AND MODIFY SUBSEQUENT QUESTIONS ACCORDINGLY: Has there ever been another time when you were depressed and had even more of the problems (SXS) that I just asked you about?

A. At least 5 of the following symptoms have each been present during the same two-week period; at least one of the symptoms was either (1) depressed mood, or (2) loss of interest or pleasure.

NOTE: DO NOT INCLUDE SXS THAT ARE CLEARLY DUE TO A PHYSICAL CONDITION, MOOD-INCONGRUENT DELUSIONS OR HALLUCINATIONS, INCOHERENCE OR MARKED LOOSENING OF ASSOCIATIONS.

5. Have you ever had a period when you were feeling depressed or down most of the day nearly every day? (What was that like?)

(1) depressed mood most of the day, nearly every day (either by subjective account, e.g., feels "down" or "low," or observed by others to look sad or depressed)

DK 01 02 03

IF YES: When was that? How long did it last? (As long as two weeks?)

7. What about a time when you were uninterested in most things or unable to enjoy the things you used to? (What was that like?)

(2) loss of interest or pleasure in all or almost all activities nearly every day (either by subjective account or observed by others to be apathetic)

DK 01 02 03

IF YES: When was that? Was it nearly every day? How long did it last? (As long as two weeks?)

IF NEITHER
ITEM (1)
NOR (2) IS
CODED
GO TO
*CURRENT
MANIC SYN-
DROME,*
A. 9

Have you had more than one time like that?

IF MORE THAN ONE: Which time was the worst?

FOCUS ON THE WORST EPISODE
THAT THE SUBJECT CAN REMEMBER

During that time...

- | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| <p>8. ..did you lose or gain any weight? (How much?)</p> <p>IF NO: How was your appetite? (What about compared to your usual appetite? Did you have to force yourself to eat? Eat [less/more] than usual? Was that nearly every day?)</p> | <p>(3) significant weight loss or weight gain when not dieting or binge eating (e.g., more than 5% of body weight in a month); or decrease or increase in appetite nearly every day</p> | <p>DK 01 02 03</p> |
| <p>9. ..how were you sleeping? (Trouble falling asleep, waking frequently, trouble staying asleep, waking too early, sleeping too much? How many hours a night compared to usual? Was that nearly every night?)</p> | <p>(4) insomnia or hypersomnia nearly every day</p> | <p>DK 01 02 03</p> |
| <p>10. ..were you so fidgety or restless that you were unable to sit still? (If I had seen you, would I have noticed it? Was that nearly every day?)</p> <p>IF NO: What about the opposite -- talking or moving more slowly than is normal for you? (If I had seen you, would I have noticed it? Was that nearly every day?)</p> | <p>(5) psychomotor agitation or retardation nearly every day (observable by others and not merely subjective feelings of restlessness or being slowed down)</p> | <p>DK 01 02 03</p> |
| <p>11. ..what was your energy like? (Tired all the time? Nearly every day?)</p> | <p>(6) fatigue or loss of energy nearly every day</p> | <p>DK 01 02 03</p> |
| <p>12. ..how did you feel about yourself? (worthless?) (Nearly every day?)</p> <p>IF NO: What about feeling guilty about things you had done or not done? (Nearly every day?)</p> | <p>(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)</p> | <p>DK 01 02 03</p> |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During that time...

3. ...did you have trouble thinking or concentrating? (Nearly every day?) DK 01 02 03

(8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or observed by others)

IF NO: Was it hard to make decisions about everyday things? (Nearly every day?)

4. ...were things so bad that you were thinking you would be better off dead or thinking about hurting yourself? (Nearly every day?) DK 01 02 03

(9) thoughts that he or she would be better off dead, or suicidal ideation, nearly every day; a suicide attempt

(Did you do anything to hurt yourself?)

5. 01 03

AT LEAST FIVE OF THE ABOVE SXS ARE CODED "03" AND AT LEAST ONE OF THESE IS ITEM (1) OR (2)

IF NOT ALREADY ASKED: Has there been any other time when you were (depressed/OWN EQUIVALENT) and had even more of the symptoms that I just asked you about?

IF NO: GO TO *CURRENT MANIC SYNDROME,* PAGE A. 9.

IF YES: RECODE SXS A (1-9) FOR WORST EPISODE.

ETIOLOGIC ROLE OF AN ORGANIC FACTOR IN FULL DEPRESSIVE SYNDROME

6. Just before this began, were you physically ill? (What did the doctor say?) DK 01 03

Were you taking any drugs or medicines? (Any change in the amount you were taking?)

Drinking a lot? (Any change?)

B.(1) An organic etiology has been ruled out; i.e., either there was no new organic factor (or change in a pre-existing organic factor) that precipitated the disturbance, or the disturbance has persisted for at least one month beyond the cessation of the precipitating organic factor.

IF YES TO ANY OF THESE QUESTIONS, DETERMINE IF THE DEPRESSIVE EPISODE WAS PRECIPITATED AND SUSTAINED BY AN ORGANIC FACTOR.

IF ORGANIC FACTOR, DESCRIBE:

R/O ORG MOOD SYNDROME	NO ORG ETIOLOGY
GO TO *CURRENT MANIC SYNDROME,* A. 9	CONTINUE

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

27. IF DURATION OF DEPRESSION HAS BEEN RELATIVELY BRIEF: Did this begin soon after someone close to you died?

IF YES, DETERMINE IF ANY DEPRESSIVE EPISODE WAS NOT DUE TO UNCOMPLICATED BEREAVEMENT. IF SO, CODE "03."

B.(2) Not a normal reaction to the loss of a loved one (Uncomplicated Bereavement). (NOTE: Morbid preoccupation with worthlessness, suicidal ideation, marked functional impairment or psychomotor retardation, or prolonged duration, suggest bereavement complicated by Major Depression.)

NOTE: CODE "03" IF AT LEAST ONE EPISODE IS NOT UNCOMPLICATED BEREAVEMENT

DK 01 03

R/O UNCOMPLICATED BE- REAVE- MENT	AT LEAST ONE EPI- ISODE NOT DUE TO UNCOMP BE- REAVE- MENT
GO TO *CUR- RENT MANIC SYN- DROME,* A. 9	

28.

MAJOR DEPRESSIVE SYNDROME CRITERIA A AND B ARE CODED "03"

01 03

GO TO *CUR- RENT MANIC SYN- DROME,* A. 9	PAST MAJOR DEP SYN- DROME
------------------------------------------------------------	---------------------------------------

29. How old were you when you first had a lot of these symptoms for at least two weeks?

Age at onset of Major Depressive Syndrome

--	--

30. How many separate times were you (depressed/OWN EQUIVALENT) nearly every day for at least two weeks and had several of the symptoms that you described, like (SXS OF WORST EPISODE)?

Number of episodes of Major Depressive Syndrome (CODE 97 IF TOO NUMEROUS OR INDISTINCT TO COUNT)

--	--

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

CURRENT MANIC SYNDROME

MANIC SYNDROME CRITERIA

IF THOROUGH OVERVIEW OF PRE-SENT ILLNESS PROVIDES NO BASIS FOR SUSPECTING A CURRENT MANIC SYNDROME, CHECK HERE AND GO TO *PAST MANIC SYNDROME,* A. 13 ____.

← INTERVIEWER CHECKPOINT

31. In the last month, has there been a period of time when you were feeling so good or hyper that other people thought you were not your normal self or you were so hyper that you got into trouble? (Did anyone say you were manic?)

A. One or more distinct periods when mood was abnormally and persistently elevated, expansive, or irritable.

DK 01 02 03

GO TO
*PAST
MANIC
SYN-
DROME,*
A .13

IF UNCLEAR: Was that more than just feeling good?

32. IF NO: What about a period of time when you were so irritable that you would shout at people or start fights or arguments?

IF IRRITABLE MOOD ONLY, CIRCLE HERE AFTER CODING "03" ABOVE

No 01
Yes 03

DATE:

What was that like?

How long did that last?

When were you the most (OWN EQUIVALENT FOR EUPHORIA OR IRRITABILITY)?

FOR THE WORST PERIOD OF CURRENT EPISODE, ASK ABOUT ASSOCIATED SXS

(During this time...)

B. During the period of mood disturbance, at least three of the following symptoms have persisted (four if the mood is only irritable) and have been present to a significant degree:

33. ...how did you feel about yourself?

(1) inflated self-esteem (grandiosity, which may be delusional)

DK 01 02 03

(More self-confident than usual?)

(Any special powers or abilities?)

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During this time...

- | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| <p>14. ..did you need less sleep than usual?

IF YES: Did you still feel rested?</p> | <p>(2) decreased need for sleep, e.g., feels rested after only three hours of sleep</p> | <p>DK 01 02 03</p> |
| <p>15. ..were you more talkative than usual? (People had trouble stopping you or understanding you? People had trouble getting a word in edgewise?)</p> | <p>(3) more talkative than usual or pressure to keep talking</p> | <p>DK 01 02 03</p> |
| <p>16. ..were your thoughts racing through your head?</p> | <p>(4) flight of ideas or subjective experience that thoughts are racing</p> | <p>DK 01 02 03</p> |
| <p>17. ..did you have trouble concentrating because any little thing going on around you could get you off the track?</p> | <p>(5) distractibility, i.e., attention too easily drawn to unimportant or irrelevant external stimuli</p> | <p>DK 01 02 03</p> |
| <p>18. ..how did you spend your time? (Work, friends, hobbies?)

Were you so active that your friends or family were concerned about you?

IF NO: Were you physically restless? How bad was it?</p> | <p>(6) increase in activity (either socially, at work, or sexually) or physical restlessness</p> | <p>DK 01 02 03</p> |
| <p>19. ..did you do anything that could have caused trouble for you or your family? (Buying things you didn't need?) (Anything sexual that was unusual for you?) (Reckless driving?)</p> | <p>(7) excessive involvement in activities that have a high potential for painful consequences which is not recognized, e.g., buying sprees, sexual indiscretions, foolish business investments, reckless driving</p> | <p>DK 01 02 03</p> |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

40.

AT LEAST THREE "B" SXS ARE CODED "03" (FOUR IF MOOD ONLY IRRITABLE)

01 03

GO TO
*PAST
MANIC
SYN-
DROME,*
A. 13

41. IF NOT KNOWN: At that time, did you have serious problems at home or at work (school) because you were (SYMPTOMS) or did you have to be admitted to the hospital?

C. The episode of mood disturbance was sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others, or hospitalization was necessary to prevent harm to self or others.

01 03

HYPO-
MANIC

MANIC

DESCRIBE:

ETIOLOGIC ROLE OF AN ORGANIC FACTOR IN MANIC OR HYPOMANIC SYNDROME

42. Just before this began, were you taking any drugs or medicines? (Any change in the amount you were taking?)

D. Except for somatic antidepressant treatment (e.g., drugs, ECT), an organic etiology has been ruled out; i.e., either there was no new organic factor (or change in a pre-existing organic factor) that precipitated the disturbance, or the disturbance has persisted for at least one month beyond the cessation of the precipitating organic factor.

DK 01 03

R/O
ORG
MOOD
SYN-
DROME

NO
ORG
ETIO-
LOGY

CON-
TINUE

GO TO
*PAST
MANIC
SYN-
DROME,*
A. 13

Drinking a lot? (Any change?)

IF YES TO ANY OF THESE QUESTIONS, DETERMINE IF THE MANIC EPISODE WAS PRECIPITATED AND SUSTAINED BY AN ORGANIC FACTOR.

IF ORGANIC FACTOR, DESCRIBE:

43.

MANIC SYNDROME CRITERIA A, B, C AND D ARE CODED "03"

01 03

GO TO
*PAST
MANIC
SYN-
DROME,*
A. 13

CUR-
RENT
MANIC
SYN-
DROME

4. How old were you when you first had serious problems or had to go to the hospital because you were (OWN EQUIVALENT/MANIC)?

Age at onset of Manic Syndrome.

--	--

5. How many separate times were you (HIGH/OWN EQUIVALENT) and had several of these problems for a week or more (or were hospitalized)?

Number of episodes of Manic Syndrome (CODE 97 IF TOO INDISTINCT OR NUMEROUS TO COUNT)

--	--

GO TO *PSYCHOTIC SYMPTOMS,* B. 1

PAST MANIC SYNDROME

MANIC SYNDROME CRITERIA

6. Have you ever had a time when you were feeling so good or hyper that other people thought you were not your normal self or you were so hyper that you got into trouble? (Did anyone say you were manic?)

A. One or more distinct periods when mood was abnormally and persistently elevated, expansive, or irritable. functioning or in usual social activities or relationships with others) when mood was abnormally and persistently elevated, expansive, or irritable.

DK 01 02 03

GO TO *DYS-THY-MIA,* A. 16

IF UNCLEAR: Was that more than just feeling good?

IF NO: What about a period of time when you were so irritable that you

47. would shout at people or start arguments?

DATE:

IF IRRITABLE MOOD ONLY, CIRCLE HERE AFTER CODING "03" ABOVE

No 01 Yes 03

When was that?

What was it like?

Have you had more than one time like that?

IF YES: Which time were you the most (HIGH/OWN EQUIVALENT)?

B. During the period of mood disturbance, at least three of the following symptoms have persisted (four if the mood is only irritable) and have been present to a significant degree:

(During that time...)

48. ...how did you feel about yourself?

(1) inflated self-esteem (grandiosity, which may be delusional)

DK 01 02 03

(More self-confident than usual?)

(Any special powers or abilities?)

49. ...did you need less sleep than usual?

(2) decreased need for sleep, e.g., feels rested after only three hours of sleep

DK 01 02 03

IF YES: Did you still not feel tired or sleepy?

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During that time...

- 50. ..were you more talkative than usual? (People had trouble stopping you or understanding you? People had trouble getting a word in edgewise?) (3) more talkative than usual or pressure to keep talking DK 01 02 03

- 51. ..were your thoughts racing through your head? (4) flight of ideas or subjective experience that thoughts are racing DK 01 02 03

- 52. ..did you have trouble concentrating because any little thing going on around you could get you off the track? (5) distractibility, i.e., attention too easily drawn to unimportant or irrelevant external stimuli DK 01 02 03

- 53. ..how did you spend your time? (Work, friends, hobbies?) (6) increase in activity (either socially, at work, or sexually) or physical restlessness DK 01 02 03
 Were you so active that your friends or family were concerned about you?
 IF NO: Were you physically restless? How bad was it?

- 54. ..did you do anything that could have caused trouble for you or your family? (Buying things you didn't need?) (Anything sexual that was unusual for you?) (Reckless driving?) (7) excessive involvement in activities that have a high potential for painful consequences which is not recognized, e.g., buying sprees, sexual indiscretions, foolish business investments, reckless driving DK 01 02 03

- 5. AT LEAST THREE "B" SXS ARE CODED "03" (FOUR IF MOOD ONLY IRRITABLE) 01 03

GO TO *DYS- THYMIA,* A. 16

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

36. IF NOT KNOWN: At that time, did you have serious problems at home or at work (school) because you were (SYMPTOMS) or did you have to be admitted to the hospital?

C. The episode of mood disturbance was sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others, or hospitalization was necessary to prevent harm to self or others.

01 03

HYPO-MANIC	MANIC

ETIOLOGIC ROLE OF AN ORGANIC FACTOR IN FULL MANIC SYNDROME

37. Just before this began, were you taking any drugs or medicines? Drinking a lot?

D. Except for somatic anti-depressant treatment (e.g., drugs, ECT), an organic etiology has been ruled out; i.e., either there was no new organic factor (or change in a pre-existing organic factor) that precipitated the disturbance, or the disturbance has persisted for at least one month beyond the cessation of the precipitating organic factor.

DK 01 03

R/O ORG MOOD SYN- DROME	NO ORG ETIO- LOGY
GO TO *DYS- THY- MIA,* A. 16	CON- TINUE

IF YES TO EITHER OF THESE QUESTIONS, DETERMINE IF MANIC EPISODE WAS PRECIPITATED OR SUSTAINED BY AN ORGANIC FACTOR.

IF ORGANIC FACTOR, DESCRIBE:

38.

MANIC SYNDROME CRITERIA A, B, C AND D ARE CODED "03"

01 03

GO TO *PSY- CHOTIC SXS,* B. 1	PAST MANIC SYN- DROME

39. How old were you when you first had serious problems or had to go to the hospital because you were (OWN EQUIVALENT/MANIC)?

Age at onset of Manic Syndrome.

□ □

40. How many separate times were you (HIGH/OWN EQUIVALENT) and had several of these problems for a week or more (or were hospitalized)?

Number of episodes of Manic Syndrome (CODE 97 IF TOO INDISTINCT OR NUMEROUS TO COUNT)

□ □

GO TO *PSYCHO- TIC SXS,* B. 1

DYSTHYMIA CRITERIA

DYSTHYMIA (CURRENT)

INTERVIEWER CHECKPOINT:

IF: THE OVERVIEW INDICATES THAT A CHRONIC PSYCHOTIC DISORDER IS LIKELY, OR MAJOR DEPRESSION HAS BEEN PRESENT FOR MORE THAN 50% OF THE PAST TWO YEARS, OR A HYPOMANIC OR MANIC EPISODE HAS EVER BEEN PRESENT, CHECK HERE AND GO TO B. *PSYCHOTIC SYMPTOMS* _____.

61. -> IF NO MAJOR DEPRESSIVE SYNDROME DURING PAST TWO YEARS: During the past couple of years, have you been bothered by depressed mood most of the day, more days than not?

IF YES: What was that like?

-> IF MAJOR DEPRESSIVE SYNDROME PRESENT DURING PAST TWO YEARS: Other than the (MAJOR DEPRESSIVE SYNDROME) we've already talked about, during the past couple of years have you been bothered by depressed mood most of the day, more days than not?

IF YES: What was that like?

During these periods of (OWN EQUIVALENT FOR MILD DEPRESSION), do you often...

62. ...lose your appetite? (What about overeating?)

(1) poor appetite or overeating

DK 01 02 03

63. ...have trouble sleeping or sleep too much?

(2) insomnia or hypersomnia

DK 01 02 03

64. ...have little energy to do things or feel tired alot?

(3) low energy or fatigue

DK 01 02 03

65. ...feel down on yourself? (feel worthless, or a failure?)

(4) low self-esteem

DK 01 02 03

GO TO NEXT MODULE

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During these periods, do you often...

- 6. ...have trouble concentrating or making decisions? (5) poor concentration or difficulty making decisions DK 01 02 03
- 7. ...feel pessimistic about the future? (6) pessimism DK 01 02 03
- 8. AT LEAST TWO DEPRESSIVE SXS ARE CODED "03" 01 03

GO TO
NEXT
MODULE

- 9. What is the longest period of time in the last two years that you have felt OK (NO DYSTHYMIC SXS)? B. For the past two years, never without these symptoms for more than two months at a time. DK 01 03
- CODE "01" IF NORMAL MOOD FOR MORE THAN TWO MONTHS AT A TIME

GO TO
NEXT
MODULE

- 10. When did [SX OF DYSTHYMLIA] begin? (COMPARE WITH DATE OF ONSET OF FIRST MAJOR DEPRESSIVE SYNDROME, A. 8) C. During the first two years of the disturbance, no clear evidence of a major depressive episode. NOTE: There may have been a prior major depressive episode provided that there was a full remission (no significant signs or symptoms for six months) prior to the development of the Dysthymia. In addition, after two years of Dysthymia, major depressive episodes may be superimposed, in which case both diagnoses are given. DK 01 02 03
- CODE "03" IF NO MDS IN FIRST TWO YEARS

GO TO
NEXT
MODULE

- 11. Age at onset of current Dysthymic Syndrome.

72. IF NOT ALREADY CLEAR:
RETURN TO THIS ITEM AFTER
COMPLETING THE PSYCHOTIC
DISORDERS SECTION.

D. Not superimposed on a
chronic psychotic disorder
(e.g., Schizophrenia or
Delusional Disorder).

DK 01 03

EXPLORE POSSIBLE ETIOLOGIC
ROLE OF SUBSTANCE USE

73. Have you been taking any drugs
or medicines during this time
(past two years)?

E. Not sustained by a spe-
cific organic factor or
substance, e.g., prolonged
administration of an anti-
hypertensive medication.

DK 01 03

R/O ORG MOOD SYN- DROME	NO ORG ETIO- LOGY CON- TINUE
-------------------------------------	-------------------------------------------------

IF ORGANIC FACTOR, DESCRIBE:

74.

DYSTHYMIC SYNDROME CRITERIA
A, B, C, D AND E ARE CODED "03"

01 03

GO TO NEXT MODULE	DYS- THY- MIA
-------------------------	---------------------

75.

Specify type (revise at end of interview if necessary):	
Primary (the mood disturbance is not related to a pre-existing chronic non-mood Axis I or Axis III disorder, e.g., Anorexia Nervosa, Somatization Disorder, a Psychoactive Substance Dependence Disorder, an Anxiety Disorder, or rheumatoid arthritis)	01
Secondary (the mood disturbance is apparently related to a pre-existing chronic non-mood Axis I or Axis III disorder)	02

PSYCHOTIC SCREENING

THIS MODULE IS FOR DETERMINING WHETHER NON-ORGANIC PSYCHOTIC SYMPTOMS HAVE BEEN PRESENT AT ANY TIME DURING THE SUBJECT'S LIFE. (IN SOME CLINICAL AND RESEARCH SETTINGS SUBJECTS WITH A HISTORY OF NON-ORGANIC PSYCHOTIC SYMPTOMS WILL BE EXCLUDED.)

FOR ANY PSYCHOTIC SYMPTOMS CODED "03" DETERMINE WHETHER THE SYMPTOM IS "NOT ORGANIC" OR WHETHER THERE IS A POSSIBLE OR DEFINITE ORGANIC CAUSE. THE FOLLOWING QUESTIONS MAY BE USEFUL IF THE OVERVIEW HAS NOT ALREADY PROVIDED THE INFORMATION:

When you were (PSYCHOTIC SXS), were you taking any drugs or medicines? Drinking a lot? Physically ill?

- IF HAS NOT ACKNOWLEDGED 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 EXPERIENCES). Now I am going to ask you more about those kinds of things.

DELUSIONS

A false personal belief 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 (an unreasonable and sustained belief that is maintained with less than delusional intensity) as 02

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

Delusions of reference, i.e., personal significance is falsely attributed to objects or events in environment

2. What about receiving special messages from people or from the way things were arranged around you, or from the newspaper, radio or TV?

DATES:

DESCRIBE:

DK	01	02	03
	01		03
	POSS/DEF		NCT
	ORG		ORG

- | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----|-----------------|----|------------|
| 3. | What about anyone going out of the way to give you a hard time, or trying to hurt you? | Persecutory delusions, i.e., the individual (or his or her group) is being attacked, harassed, cheated, persecuted, or conspired against. | DK | 01 | 02 | 03 |
| 4. | IF YES: Do you know why this happened to you? | DATES:

DESCRIBE: | | 01 | | 03 |
| | | | | POSS/DEF
ORG | | NOT
ORG |
| | | | | | | |
| 5. | 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? | Grandiose delusions, i.e., content involves exaggerated power, knowledge or importance | DK | 01 | 02 | 03 |
| 6. | | DATES:

DESCRIBE: | | 01 | | 03 |
| | | | | POSS/DEF
ORG | | NOT
ORG |
| | | | | | | |
| 7. | Did you ever feel that parts of your body had changed or stopped working (when your doctor said there was nothing wrong with you)? (What did your doctor say?) | Somatic delusions, i.e., content involves change or disturbance in body functioning | DK | 01 | 02 | 03 |
| 8. | | DATES:

DESCRIBE: | | 01 | | 03 |
| | | | | POSS/DEF
ORG | | NOT
ORG |
| | | | | | | |
| 9. | | Other delusions, e.g., delusions of guilt, jealousy, nihilism, poverty | DK | 01 | 02 | 03 |
| 10. | | DATES:

DESCRIBE: | | 01 | | 03 |
| | | | | POSS/DEF
ORG | | NOT
ORG |

HALLUCINATIONS (PSYCHOTIC)
 A sensory perception without external stimulation of the relevant sensory organ. (CODE "02" FOR HALLUCINATIONS WITHOUT DELUSIONAL INTERPRETATION.)

11. Did you ever hear things that other people couldn't hear, such as noises, or the voices of people whispering or talking?

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

DK 01 02 03

01	03
POSS/DEF ORG	NOT ORG

What did you hear?

DATES:
 DESCRIBE:

13. Did you ever have visions or see things that other people couldn't see?

Visual hallucinations

DK 01 02 03

01	03
POSS/DEF ORG	NOT ORG

DATES:
 DESCRIBE:

15. Other hallucinations, e.g., gustatory, olfactory

Other hallucinations, e.g., gustatory, olfactory

DK 01 02 03

01	03
POSS/DEF ORG	NOT ORG

DATES:
 DESCRIBE:

17. A non-organic psychotic symptom has been present at some time

A non-organic psychotic symptom has been present at some time

DK 01 02 03

GO TO NEXT MODULE

EXPLORE DETAILS AND DESCRIBE DIAGNOSTIC SIGNIFICANCE (E.G., SUBSTANCE-INDUCED PSYCHOTIC DISORDER, SCHIZOPHRENIA, PSYCHOTIC MOOD DISORDER, OR A TRANSIENT SX OF A NONPSYCHOTIC DISORDER, SUCH AS BORDERLINE PERSONALITY DISORDER OR POST-TRAUMATIC STRESS DISORDER)

DESCRIBE:

MOOD DISORDERS (OTHER THAN DYSTHYMLIA)

[DYSTHYMLIA HAS ALREADY BEEN CODED IN MODULE A.]

IF:

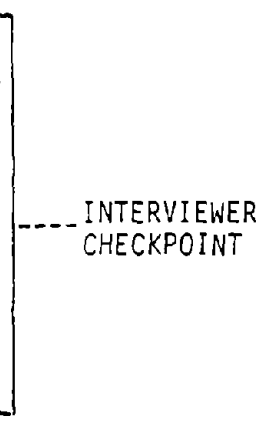
THERE HAS BEEN A MAJOR DEPRESSIVE EPISODE (PAGE A. 4 or A. 8) OR THERE HAS BEEN A MANIC OR HYPOMANIC EPISODE (PAGE A. 11 or A. 15), THEN CONTINUE WITH THIS MODULE.

IF:

THERE HAS NEVER BEEN ONE OF THE ABOVE MOOD SYNDROMES OR IF MOOD SYNDROME OCCURRED ONLY AS PART OF SCHIZOAFFECTIVE DISORDER,

THEN CHECK HERE AND SKIP TO NEXT MODULE, PTSD : ____

IF NO MANIC OR UNEQUIVOCAL HYPOMANIC EPISODE EVER, CHECK HERE AND SKIP TO *MAJOR DEPRESSIVE SYNDROME,* PAGE D. 2: ____



- 1. AT LEAST ONE PURE MANIC EPISODE (i.e., NOT SUPERIMPOSED ON SCHIZOPHRENIA, SCHIZOPHRENIFORM DISORDER, DELUSIONAL DISORDER, OR PSYCHOTIC DISORDER NOS)

BIPOLAR
DIS-
ORDER

2. Indicate Current Subtype (most recent episode in past month):

- no current episode (i.e., currently in full or partial remission) 01
- currently manic 02
- currently depressed 03
- currently mixed (i.e., meets full criteria for both manic and major depressive episodes either intermixed or rapidly alternating) 04

GO TO *MOOD CHRONOLOGY* D. 3

BIPOLAR DISORDER NOS

Describe in space below, e.g.,

- manic episode superimposed on delusional disorder, residual Schizophrenia or Psychotic Disorder NOS, or 01
- hypomanic episode(s) with major depressive episode(s) ("Bipolar II"), 02
- intermittent hypomanic episodes, or 03
- Cyclothymia 04

GO TO *MOOD CHRONOLOGY* D. 3

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

MAJOR DEPRESSIVE SYNDROME

- 4. AT LEAST ONE PURE MAJOR DEPRESSIVE EPISODE (i.e., NOT SUPERIMPOSED ON SCHIZOPHRENIA, SCHIZOPHRENIFORM DISORDER, DELUSIONAL DISORDER, OR PSYCHOTIC DISORDER NOS)

DK 01 03

MAJOR DEPRES- SION

GO TO *MOOD CHRONOLOGY* D. 3

DEPRESSIVE DISORDER NOS

- 5. (for major depressive episodes superimposed on chronic or intermittent psychotic conditions)

01 03

DEPRES- SIVE DISORDER NOS

GO TO *MOOD CHRONOLOGY* D. 3

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

MOOD CHRONOLOGY

IF UNCLEAR: During the past month, have you had (DEPRESSIVE OR MANIC SXS CODED	Has met symptomatic criteria for manic syndrome (criteria A and B) or depressive syn- (criterion A) in past month.	DK	01	03
--------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------	----	----	----

When did you last have (EITHER DEPRESSED MOOD, OR EUPHORIC OR IRRITABLE MOOD)? (i.e., most recent episode)	Number of months prior to interview when last had either depressed, or euphoric or irritable mood	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>				(SKIP TO	*PAST FIVE YEARS* D. 4)

NOTE SUBCLASSIFICATION OF CURRENT EPISODE (FOR WORST WEEK IN PAST MONTH) AS FOLLOWS:
(Additional questions regarding social and occupational impairment may be necessary.)

- IF CURRENT EPISODE IS MANIC OR MIXED (IF DEPRESSED, D. 4)
- Mild: Meets minimum symptom criteria for a manic episode. 01
 - Moderate: Extreme increase in activity or impairment in judgment. 02
 - Severe, without Psychotic Features: Almost continual supervision is required in order to prevent physical harm to self or others. 03
 - With Psychotic Features: Delusions, or hallucinations (with delusional interpretation). Specify whether the psychotic features are mood-congruent or mood incongruent. 04
 - Mood-congruent psychotic features: Delusions or hallucinations whose content is entirely consistent with the typical manic themes of inflated worth, power, knowledge, identity, or special relationship to a deity or famous person. 05
 - Mood-incongruent psychotic features: Either (a) or (b): 06
 - (a) Delusions or hallucinations whose content does not involve the typical manic themes of inflated worth, power, knowledge, identity, or special relationship to a deity or famous person. Included are such symptoms as persecutory delusions, thought insertion, and delusions of being controlled.
 - (b) Any catatonic symptoms, e.g., stupor, mutism, negativism, or posturing.

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

IF CURRENT EPISODE IS DEPRESSED:

- Mild: Few, if any, symptoms in excess of those required to make the diagnosis AND symptoms result in only minor impairment in occupational functioning or in usual social activities or relationships with others 01
- Moderate: Symptoms or functional impairment intermediate between "mild" and "severe" 02
- Severe, without Psychotic Features: Several symptoms in excess of those required to make the diagnosis AND symptoms markedly interfere with occupational functioning or with usual social activities or relationships with others 03
- With Psychotic Features: Delusions, or hallucinations (with delusional interpretation). Specify whether the psychotic features are mood-congruent or mood-incongruent. 04
- Mood-congruent psychotic features: Delusions or hallucinations whose content is entirely consistent with the typical depressive themes of personal inadequacy, guilt, disease, death, nihilism, or deserved punishment. 05
- Mood-incongruent psychotic features: Delusions or hallucinations whose content does not involve typical depressive themes of personal inadequacy, guilt, disease, death, nihilism, or deserved punishment. Included here are such symptoms as persecutory delusions, thought insertion, thought broadcasting, and delusions of control. 06

PAST FIVE YEARS

0. During the past five years, how much of the time have you been bothered by (EUPHORIC/IRRITABLE MOOD AND/OR DEPRESSED MOOD AND/OR LOSS OF INTEREST)? Would you say...[CODES]?
- Approximate percentage of time during past five years that euphoric/irritable AND/OR depressed mood AND/OR loss of interest were present. (CODE 01-06 USING DEFINITIONS IN BOX BELOW)
- | | |
|--|--|
| | |
|--|--|

CODES FOR *PAST FIVE YEARS*

- 01 Almost all the time (e.g., 90-100%)
- 02 A significant majority of the time (e.g., 70-80%)
- 03 About half the time
- 04 A significant minority of the time (e.g., 20-30%)
- 05 Rarely (e.g., 5-10%)
- 06 Not at all (0%)

POST-TRAUMATIC STRESS DISORDER

HISTORY OF PSYCHOSOCIAL STRESSORS

1. Sometimes things happen to people that are very stressful or disturbing --things that do not happen to most people and are so bad that they would be distressing, upsetting, or frightening to almost everyone. By that I mean things like major earthquakes or floods, very serious accidents or fires, physical assault or rape, seeing other people killed or dead, being in a war or heavy combat, or some other type of disaster. At any time during your life--that is, before, during, or after you were in the military--have any of these kinds of things happened to you? (LIST ALL TRAUMATIC EVENTS MENTIONED; RECORD DETAILS ON FACING PAGE.)

Now I'd like to ask you a few specific questions about your military experience.

2. In which branch of the service did you serve? Army 01 Navy 02 Air Force 03
Marines 04 Coast Guard 05

3. Were you drafted or did you enlist? Drafted 01 Enlisted 02

4. Were you stationed in Vietnam? No 01 Yes 03

IF YES: 4a. When did you first go to Vietnam? 19
month year

4b. How many tours did you serve?
tours

In or near what cities, corps, sectors, etc., of Vietnam did you serve (e.g., Quang Tri, Camp Evans, Mekong Delta, Khe Sahn)? (LIST MENTIONS)

4c. Were you an officer or enlisted person while in Vietnam? Officer 01 Enlisted 03

5. Overall, would you describe (CIRCLE ONE):
the unit(s) that you were assigned to in Vietnam as
mainly combat, mainly combat support, or mainly service support?
mainly combat? 01
mainly combat support? 02
(served in unit directly supporting a combat unit)
mainly service support? 03
(noncombat related duty)

Traumatic Events List:

Event #

Brief Description

Date (month/year)

6. Were you ever involved in combat? No 01 Yes 03
7. Did you ever fire a weapon in a combat situation? No 01 Yes 03
8. Were you ever under enemy fire? No 01 Yes 03
9. Did you see people being killed or wounded or people who had been killed or wounded?
(IF YES: How frequently?) No 01 Yes 03
10. Were you ever in danger of being injured or killed?
(IF YES: How frequently?) No 01 Yes 03
11. Were you wounded or injured in Vietnam? No 01 Yes 03
- 11a. (IF YES: Can you tell me about your injury?) (RECORD INJURY TYPE) _____

--	--	--
- 11b. Do you have a service connected disability? No 01 Yes 03
- 11.c. (IF YES: What percentage?)

--	--	--

 %
- 11d. (What is it for?) _____

--	--	--
12. Overall, what do you think has been the impact of your military experience on your life since that time? (RECORD DETAILS ON FACING PAGE. IF R DOES NOT MENTION, PROBE FOR BOTH PERCEIVED POSITIVE AND NEGATIVE EFFECTS, AND FOR VARIOUS ASPECTS OF ADJUSTMENT--FAMILY, WORK, SCHOOL, ETC.)
13. Of all the things that have happened to you or that you have done in your life, including Vietnam, what were the most upsetting? (RECORD DETAILS ON FACING PAGE)

14. I'd like you to try to recall as best you can how you felt and what you experienced at the time (most upsetting event) happened, including the few minutes just before. Now, I'm going to ask you some specific questions about how you felt at that time.

- | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|----|
| 14a. (At that time) Did you have moments of losing track of what was going on--that is, did you "blank out", "space out", or in some other way not feel that you were not a part of the experience? | DK | 01 | 02 | 03 |
| 14b. (At that time) Did you find yourself going on "automatic pilot"--that is, doing something that you later realized you had done but hadn't actively decided to do? | DK | 01 | 02 | 03 |
| 14c. (At that time) Did your sense of time change during the event--that is, did things seem unusually speeded up or slowed down? | DK | 01 | 02 | 03 |
| 14d. (At that time) Did what was happening seem unreal to you, as though you were in a dream or watching a movie or a play? | DK | 01 | 02 | 03 |
| 14e. (At that time) Were there moments when you felt as though you were a spectator watching what was happening to you--for example, did you feel as if you were floating above the scene or observing it as an outsider? | DK | 01 | 02 | 03 |
| 14f. (At that time) Were there moments when your sense of your own body seemed distorted or changed--that is, did you feel yourself to be unusually large or small, or did you feel disconnected from your body? | DK | 01 | 02 | 03 |
| 14g. (At that time) Did you get the feeling that something that was happening to someone else was happening to you? For example, if you saw someone being injured, did you feel as though you were the one being injured, even though this was not the case? | DK | 01 | 02 | 03 |
| 14h. Were you surprised to find out after the event that a lot of things had happened at the time that you were not aware of, especially things that you felt you ordinarily would have noticed? | DK | 01 | 02 | 03 |
| 14j. (IF R WAS INJURED DURING THE EVENT) If you were injured, did you find that you felt surprisingly little pain at the time of the injury? | DK | 01 | 02 | 03 |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

POST-TRAUMATIC STRESS DISORDER CRITERIA

15. (CODE FROM ANSWERS TO STRESSOR QUESTIONS ABOVE)

A. The individual has experienced an event (or multiple events) that is outside the range of usual human experience and that would be markedly distressing to almost anyone.

A. Premilitary
01 03
B. Military
01 03
C. Postmilitary
01 03

Now I'd like to ask a few questions about specific ways that (this event/these events) may have affected you. Did (this event/any of these events) keep coming back to you in some way? For example . . .

B. During some phase of the illness, the traumatic event is persistently reexperienced in at least one of the following ways:

16. ..did you think about (this event/any of these events when you didn't want to or did (it/they) come to you suddenly and vividly when you didn't want (it/them) to, perhaps even when there was nothing there to remind you of (it/them)?

(1) recurrent and intrusive distressing recollections of the event

A. Lifetime
DK 01 02 03
B. Current
DK 01 02 03

(IF YES: Can you tell me more about that? RECORD CONTENT ON FACING PAGE.)

17. ..what about having dreams about (it/them)?

(2) recurrent distressing dreams of the event

A. Lifetime
DK 01 02 03
B. Current
DK 01 02 03

(IF YES: Can you tell me more about that? RECORD CONTENT ON FACING PAGE.)

18. ..what about finding your-
self acting or feeling as
though you were back at
that time?

(IF YES: Can you tell me
more about that? RECORD
CONTENT ON FACING PAGE)
- (3) sudden acting or
feeling as if the trau-
matic event were recur-
ring (includes a sense
of reliving the exper-
ience, illusions, hallu-
cinations, and dissociative
(flashback) episodes, even
those that occur upon
awakening or when intoxi-
cated)
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
19. ..did you feel a lot worse
when you were in a situa-
tion that reminded you
of (this event/any of
these events)?

(IF YES: Can you tell me
more about that? RECORD
CONTENTS ON FACING PAGE)
- (4) intense psychologi-
cal distress at expo-
sure to events that
symbolize or resemble
an aspect of the trau-
matic event (including
anniversaries of the
event)
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
- 20.
- "B" Criterion Summary:
AT LEAST ONE "B" SX IS
CODED "03"
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
- C. Persistent avoidance of
stimuli associated with
the distressing event or
numbing of responsiveness
(not present before the
trauma), as indicated by
at least three of the
following:
- Since (THE TRAUMA)...
21. ..did you make a special
effort to avoid thinking
about what happened or
getting upset about (it/
them)? (IF YES, IDENTIFY
EVENTS AVOIDED ON FACING
PAGE)
- (1) deliberate efforts
to avoid thoughts or
feelings associated
with the event
- A. Lifetime
DK 01 02 03
- B. Current
DK .1 02 03

22. ..did you stay away from things that would remind you of (it/them)? (IF YES, IDENTIFY EVENTS AVOIDED ON FACING PAGE) (2) deliberate efforts to avoid activities or situations that arouse recollections of the event
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
23. ..did you have trouble remembering some important part of what happened? (IF YES, IDENTIFY EVENTS ON FACING PAGE) (3) inability to recall an important aspect of the event (psychogenic amnesia)
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
- Since (THE TRAUMA) ...
24. ..were you much less interested in things that used to be important to you, like sports, hobbies, social activities? (4) markedly diminished interest in significant activities
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
25. ..did you feel distant or cut off from others? (5) feeling of detachment or estrangement from others
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
26. ..did you no longer feel strongly about things, or feel "numb," or feel that you were not able to have loving feelings for people close to you? (6) restricted range of affect, e.g., "numbing," unable to have loving feelings
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
27. ..did you notice a change in the way you think about or plan for the future? (7) sense of a fore-shortened future, e.g., child does not expect to have a career, marriage, children or a long life
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03
28. "C" CRITERION SUMMARY:
At least 3 "C" sx's are coded "03"
- A. Lifetime
DK 01 02 03
- B. Current
DK 01 02 03

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

Since (THE TRAUMA) . .

D. Persistent symptoms of increased arousal (not present before the trauma) as indicated by at least two of the following:

- | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 29. ..did you have trouble sleeping? (What kind of trouble?) | (1) difficulty falling or staying asleep | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 30. ..were you unusually irritable? What about outbursts of anger? | (2) irritability or outbursts of anger | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 31. ..did you have trouble concentrating? | (3) difficulty concentrating | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 32. ..were you watchful or on guard even when there was no reason to be? | (4) hypervigilance | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 33. ..were you jumpy or easily startled, like by sudden noises? | (5) exaggerated startle response | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 34. ..have you ever found yourself reacting physically to things that reminded you of (this event/any of these events) --like breaking out in a sweat, breathing heavily or irregularly, or your heart pounding or racing? | (6) physiological reactivity to events that symbolize or resemble an aspect of the event (e.g. woman who was raped in an elevator breaks out in a sweat when entering any elevator) | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |
| 35. | "D" CRITERION SUMMARY:
AT LEAST TWO "D" SXs ARE CODED "03" | A. Lifetime
DK 01 02 03

B. Current
DK 01 02 03 |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

36. About how long did these problems--(CITE POSITIVE PTSD SYMPTOMS)--last? E. Duration of the disturbance of at least one month

A. Lifetime
01 03
B. Current
01 03

37. POST-TRAUMATIC STRESS DISORDER CRITERIA A, B, C, D, AND E ARE CODED "03" for either lifetime or current (or both).

A. Lifetime
DK 01 02 03
B. Current
DK 01 02 03

POST-TRAUMATIC STRESS DISORDER

38. Do you often wonder why you survived (Vietnam or other traumatic event) but some others didn't? If so, which event(s)? Significant survivor guilt

A. Lifetime
DK 01 02 03
B. Current
DK 01 02 03

39. Is there anything you did or didn't do during (the trauma) itself that you worry about or think about a lot? If so, which event(s)?

A. Lifetime
DK 01 02 03
B. Current
DK 01 02 03

CHRONOLOGY

40. When did you last have (ANY SX OF PTSD CODED "03")? Number of months prior to interview when last had a symptom of PTSD

41. During the past five years, how much of the time have you been bothered by (ANY SXS OF PTSD)? Duration in months during past five years that any symptoms of PTSD that were present.

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

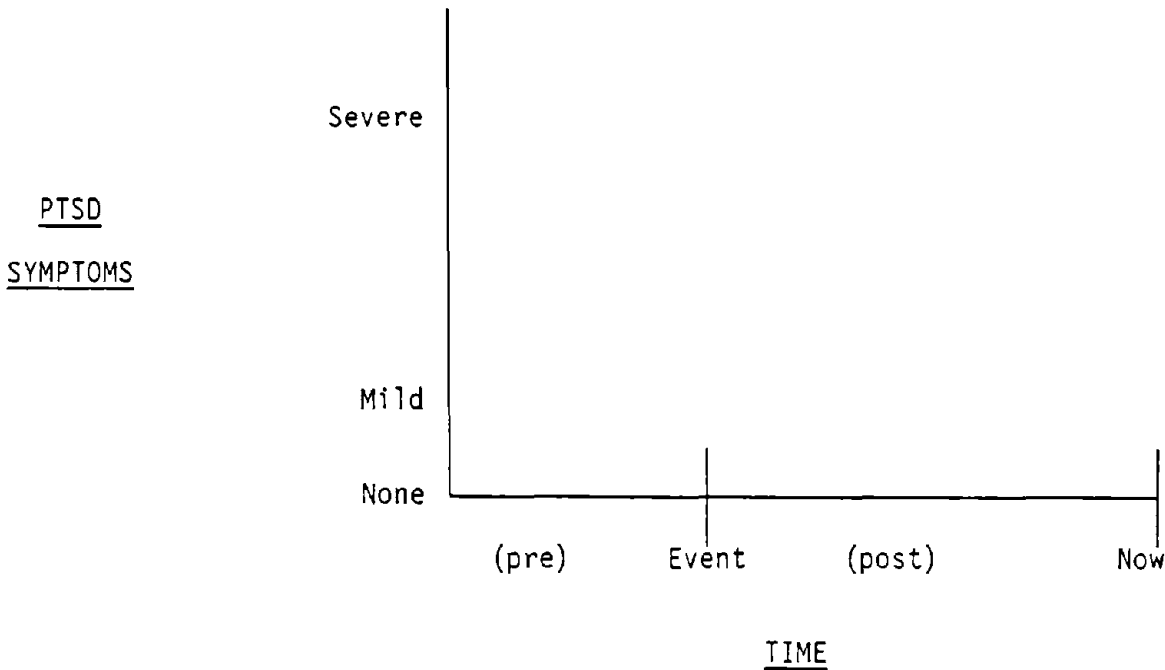
42. How old were you when you first had these problems (PTSD SYNDROME)?

Age of onset of PTSD (symptoms)

--	--

42a. I'd like you to think about the time when these problems (PTSD symptoms) were the worst, and fill out this brief form telling how you felt at that time (HAND RESPONDENT IMPACT OF EVENT, SCALE FORM)

42b. TIME LINE (course of PTSD symptoms): [DRAW TIME LINE TO REPRESENT A COMPOSITE OF WHAT THE RESPONDENT HAS TOLD YOU ABOUT THE COURSE OF HIS/HER PTSD]:



42c. Worst period: month year to month year

42d. INTERVIEWER'S RATING OF SEVERITY OF PTSD SYMPTOMS DURING WORST PERIOD:

Mild	01
Moderate	02
Severe	03

42e. INTERVIEWER'S RATING OF SEVERITY OF PTSD SYMPTOMS NOW:

Mild	01
Moderate	02
Severe	03
In partial remission (previously met criteria, currently has some significant symptoms but does not meet criteria)	04
In complete remission (previously met criteria but has no symptoms in past 6 months)	05

ANXIETY DISORDERS

PANIC DISORDER

PANIC DISORDER CRITERIA

43. Have you ever had a panic attack, when you suddenly felt frightened, anxious or extremely uncomfortable?

IF YES: Tell me about it. When does that happen? (Have you ever had one when you didn't expect to at all?)

A. At some time during the disturbance, one or more panic attacks (discrete periods of intense discomfort or fear) that were (1) unexpected, i.e., did not occur immediately before or upon exposure to a situation that almost always caused anxiety, and (2) not triggered by situations in which the individual was the focus of others' attention.

DK 01 02 03

GO TO
AWOPD,
F. 14

44. Have you ever had three attacks like that in a three-week period?

IF NO: Did you worry a lot about having another one? (How long did you worry?)

B. Either four attacks, as defined in criterion A, occurred within a four-week period, or one or more attacks were followed by a period of at least a month of persistent fear of having another attack.

DK 01 02 03

GO TO
AWOPD,
F. 14

When was the last bad one (EXPECTED OR UNEXPECTED)?

Now I am going to ask you about that attack. What was the first thing you noticed? Then what?

During that attack...

C. At least four of the following symptoms developed during at least one of the attacks:

45. ..were you short of breath? (Have trouble catching your breath?)

(1) shortness of breath (dyspnea) or smothering sensations

DK 01 02 03

46. ..did you feel as if you were choking?

(2) choking

DK 01 02 03

47. ..did your heart race, pound or skip?

(3) palpitations or accelerated heart rate (tachycardia)

DK 01 02 03

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

During that attack...

- | | | | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----|----|----|----|
| 48. | ..did you have chest pain or pressure? | (4) chest pain or discomfort | DK | 01 | 02 | 03 |
| 49. | ..did you sweat? | (5) sweating | DK | 01 | 02 | 03 |
| 50. | ..did you feel dizzy, unsteady, or like you might faint? | (6) dizziness, unsteady feelings, or faintness | DK | 01 | 02 | 03 |
| 51. | ..did you have nausea or upset stomach or the feeling that you were going to have diarrhea? | (7) nausea or abdominal distress | DK | 01 | 02 | 03 |
| 52. | ..did things around you seem unreal or did you feel detached from things around you or detached from part of your body? | (8) depersonalization or derealization | DK | 01 | 02 | 03 |
| 53. | ..did you have tingling or numbness in parts of your body? | (9) numbness or tingling sensations (paresthesias) | DK | 01 | 02 | 03 |
| 54. | ..did you have flushes (hot flashes) or chills? | (10) flushes (hot flashes) or chills | DK | 01 | 02 | 03 |
| 55. | ..did you tremble or shake? | (11) trembling or shaking | DK | 01 | 02 | 03 |
| 56. | ..were you afraid that you might die? | (12) fear of dying | DK | 01 | 02 | 03 |
| 57. | ..were you afraid you were going crazy or might lose control? | (13) fear of going crazy or of doing something uncontrolled | DK | 01 | 02 | 03 |
| 58. | AT LEAST FOUR "C" SXS ARE CODED "03" | | | 01 | | 03 |

NOTE: ATTACKS INVOLVING FOUR OR MORE SYMPTOMS ARE PANIC ATTACKS; ATTACKS INVOLVING FEWER THAN FOUR SYMPTOMS ARE LIMITED SYMPTOM ATTACKS (SEE AGORAPHOBIA WITHOUT HISTORY OF PANIC DISORDER, F.14).

GO TO
..OPD,
F. 14

DK =inadequate information 01 =absent or false 02 =subthreshold 03 =threshold or true

59. When you have had attacks, how long does it take from when it begins to when you have most of the symptoms? (Is it often less than ten minutes?)

D. During at least some of the attacks, at least four of the "C" symptoms developed suddenly and increased in intensity within ten minutes of the beginning of the first "C" symptom noticed in the attack.

DK 01 02 03

GO TO AWOPD	F. 14

60. Just before you began having panic attacks, were you taking any drugs, stimulants or medicines?

E. It cannot be established that an organic factor initiated and maintained the disturbance, e.g., amphetamine or caffeine intoxication, hyperthyroidism.

DK 01 03

GO TO AWOPD	F. 14

IF YES: Did you keep having the attacks after you stopped?

Were you physically ill?
(What did the doctor say?)

IF YES: Did you ever have these attacks when you weren't (taking any drugs or medicines, physically ill?)

NOTE: Mitral valve prolapse may be an associated condition but does not rule out a diagnosis of Panic Disorder.

NOTE: CODE "03" IF SUBSTANCE USE OR PHYSICAL ILLNESS WAS NOT ETIOLOGIC TO PANIC ATTACKS.

61.

PANIC DISORDER CRITERIA
A, B, C, D AND E ARE
CODED "03"

01 03

GO TO PANIC	DIS-
AWOPD,	ORDER
F. 14	

62. NOTE CURRENT SEVERITY OF PANIC ATTACKS:

01 Mild: During the past month, either all attacks are limited symptom attacks (i.e., fewer than four sx's), or no more than one panic attack

02 Moderate: During the past month, intermediate between "Mild" and "Severe"

03 Severe: During the past month, at least one panic attack included the symptoms of fear of dying, going crazy or doing something uncontrolled

In Partial
04 Remission: Intermediate between "In Full Remission" and "Mild"

In Full
05 Remission: During the past six months, no panic or limited symptom attacks

PANIC DISORDER SUBTYPES-
PAST MONTH

WITH AGORAPHOBIA

63. IF NOT OBVIOUS FROM OVERVIEW:
Are there situations or places
that you avoid because you are
afraid you might have an attack?

(Tell me all the things
you avoid, or can only do
by forcing yourself.)

What about...

64. ...being at home alone? N Y

65. ...shopping alone in a big
store? N Y

66. ...walking far from home
alone? N Y

67. ...crossing busy or wide
streets alone? N Y

68. ...being alone in a crowded
place—like a movie theatre,
a church, or a restaurant? N Y

69. ...using public transportation—
like a bus, train, or subway—
or driving a car? N Y

IF NOT OBVIOUS: What
effect does avoiding (AGORA-
PHOBIC SITUATIONS) have on
your life?

70. NOTE CURRENT SEVERITY OF
AGORAPHOBIC AVOIDANCE

Fear of being in places or
situations from which escape
might be difficult (or
embarrassing), or in which
help might not be available,
in the event of a panic at-
tack. As a result of this
fear, there are either travel
restrictions or need for a
companion when away from
home; or there is endurance
of agoraphobic situations
despite intense anxiety.
Common agoraphobic situations
include being outside of the
home alone, being in a crowd
or standing in a line, being
on a bridge, traveling in a
bus, train, or car.

	01	03
PANIC		PANIC
DIS.		DIS.
WITH-		WITH
OUT		AGORA-
AGORA-		PHOBIA
PHOBIA		

Mild:	some avoidance (or endurance with distress), but relatively normal lifestyle, e.g., travels unaccompanied when necessary, such as to work or to shop; otherwise avoids traveling alone	01
Moderate:	avoidance results in constricted lifestyle, e.g., able to leave house alone but not able to go more than a few miles unaccompanied	02
Severe:	avoidance results in being nearly or completely housebound or unable to leave house unaccompanied	03
In remission:	during the past 6 months, there have been no panic or limited symptom attacks	04

CHRONOLOGY

		01	03
71.	IF UNCLEAR: During the past month, how many panic attacks have you had?	Has met symptomatic criteria for Panic Disorder during past month, i.e., at least 4 panic attacks or persistent fear of having a panic attack	
72.	When did you last have (ANY SX OF PANIC DISORDER)?	Number of months prior to interview when last had a symptom of Panic Disorder	
73.	During the past five years, how much of the time have you been bothered by (PANIC ATTACKS, PERSISTENT FEAR OF HAVING AN ATTACK, OR AGORA-PHOBIC AVOIDANCE)?	Duration in months during past five years that any symptoms of Panic Disorder were present	
74.	How old were you when you first started having a lot of panic attacks (or worried all the time that you might have one)?	Age at onset of Panic Disorder (at least four attacks over a four week period or one or more attacks followed by persistent fear of having another attack)	

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or tr

AGORAPHOBIA WITHOUT HISTORY OF PANIC DISORDER (AWOPD)

AGORAPHOBIA WITHOUT HISTORY OF PANIC DISORDER (AWOPD) CRITERIA

SKIP IF EVER MET CRITERIA FOR PANIC DISORDER OR IF PSYCHOTIC (DELUSIONS, HALLUCINATIONS, DISORGANIZED SPEECH) DURING PAST MONTH, OR IF IN RESIDUAL PHASE OF SCHIZOPHRENIA.

75. Were you ever afraid of going out of the house alone, being in crowds or certain public places like tunnels, bridges, buses or trains?

What were you afraid could happen?

A. Fear of being in places or situations from which escape might be difficult (or embarrassing), or in which help might not be available, in the event of sudden incapacitation. Common agoraphobic situations include being outside of the home alone, being in a crowd or standing in a line, being on a bridge, traveling in a bus, train, or car.

DK 01 02 03

GO TO
SOCIAL
PHOBIA,
F. 16

IF FEAR OF INCAPACITATION IS RELATED TO A SPECIFIC SYMPTOM, CIRCLE BELOW:

- 76. becoming dizzy or falling N Y
- 77. depersonalization or derealization N Y
- 78. loss of bladder or bowel control N Y
- 79. fear of cardiac distress N Y
- 80. other (Specify: _____) N Y

OFFICE
USE

--	--

81. Tell me all the things you avoided (or could only do by forcing yourself).

(How often did you go outside of your house alone?)

(Did you often need a companion?)

(What effect did avoiding these situations or places have on your life?)

B. As a result of this fear, there are either travel restrictions or need for a companion when away from home; or there is endurance of agoraphobic situations despite intense anxiety.

DK 01 02 03

GO TO
SOCIAL
PHOBIA,
F. 16

82. AGORAPHOBIA WITHOUT HISTORY OF PANIC DISORDER CRITERIA A AND B ARE CODED "03"

01 03

GO TO	AGORA-
SOCIAL	PHOBIA
PHOBIA	WITHOUT
F.16	HISTORY
	OF
	PANIC
	DIS-
	ORDER

CHRONOLOGY

83.	IF UNCLEAR: During the past month, have you avoided (PHOBIC SITUATIONS)?	Has met criteria for Agoraphobia without History of Panic Disorder during past month	DK 01 03			
84.	When did you last avoid (PHOBIC SITUATIONS)?	Number of months prior to interview when last had a symptom of Agoraphobia without History of Panic Disorder	<table border="1" style="display: inline-table; width: 60px; height: 20px;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>			
85.	During the past five years, how much of the time have you avoided these situations because you were afraid?	Duration in months during past five years that any symptoms of Agoraphobia without History of Panic Disorder were present	<table border="1" style="display: inline-table; width: 60px; height: 20px;"> <tr> <td style="width: 30px;"></td> <td style="width: 30px;"></td> </tr> </table>			
86.	How old were you when you first had this problem?	Age at onset of Agoraphobia without History of Panic Disorder	<table border="1" style="display: inline-table; width: 60px; height: 20px;"> <tr> <td style="width: 30px;"></td> <td style="width: 30px;"></td> </tr> </table>			

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or t

SOCIAL PHOBIA

SOCIAL PHOBIA CRITERIA

SKIP IF PSYCHOTIC (DELUSIONS, HALLUCINATIONS, DISORGANIZED SPEECH) DURING PAST MONTH, OR IF IN RESIDUAL PHASE OF SCHIZOPHRENIA.

87. Is there anything that you were ever afraid to do or felt uncomfortable doing in front of other people, like speaking, eating or writing?

Anything else?

What were you afraid would happen when _____ ?

A. A persistent fear of one or more situations (the phobic situations) in which the individual is exposed to possible scrutiny by others and fears that he or she may do something or act in a way that will be humiliating or embarrassing. Examples include: unable to continue talking while speaking in public, choking on food when eating in front of others, unable to urinate in a public lavatory, hand trembling when writing in front of others, saying foolish things or not being able to answer questions in social situations.

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

PHOBIC SITUATIONS(S) Circle:

- 88. public speaking
89. eating in front of others
90. writing in front of others
91. generalized (most social situations)
92. other (Specify:_____)

N Y
N Y
N Y
N Y
N Y

Empty box for phobic situations

93. IF NOT ALREADY CLEAR: RETURN TO THIS ITEM AFTER COMPLETING INTERVIEW.

B. If an Axis III or another Axis I disorder is present, the fear in "A" is unrelated to it, e.g., the fear is not of having a panic attack (Panic Disorder), stuttering (Stuttering), trembling (Parkinson's disease), exhibiting abnormal eating behavior (Anorexia Nervosa or Bulimia Nervosa).

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

94. Did you always feel anxious when you (CONFRONTED PHOBIC STIMULUS)?

C. During some phase of the disturbance, exposure to the specific phobic stimulus (or stimuli) almost invariably provokes an immediate anxiety response.

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

95. IF NOT OBVIOUS: Did you go out of your way to avoid _____ ?

D. The phobic situation(s) is avoided, or endured with intense anxiety.

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

IF NO: How hard is it for you to _____ ?

96. IF NOT OBVIOUS: How important was it to you to be able to _____ ?

E. The fear or the avoidant behavior interferes with occupational functioning or with usual social activities or relationships with others, or there is marked distress about having the fear.

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

(How bothered were you that you were afraid of _____ ?)

97. Did you think that you were more afraid of (PHOBIC ACTIVITY) than you should have been (or than made sense)?

F. The individual recognizes that his or her fear is excessive or unreasonable.

DK 01 02 03

GO TO SIMPLE PHOBIA, F.19

98.

SOCIAL PHOBIA CRITERIA A, B, C, D, E, AND F ARE CODED "03"

01 03

GO TO SOCIAL PHOBIA, F.19

DK=Inadequate information 01=absent or false 02=subthreshold 03=threshold or tr

CHRONOLOGY

		DK	01	03
99.	IF UNCLEAR: During the past month, have you been bothered by (SOCIAL PHOBIA ACTIVITY)?			
100.	When were you last bothered by (SOCIAL PHOBIA ACTIVITY)?		<input type="text"/>	
101.	During the past five years, how much of the time have you been bothered by (SOCIAL PHOBIA ACTIVITY)?		<input type="text"/>	
102.	How old were you when you first were bothered by (SOCIAL PHOBIA ACTIVITY)?		<input type="text"/>	

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

SIMPLE PHOBIA

SIMPLE PHOBIA CRITERIA

SKIP IF PSYCHOTIC (DELUSIONS, HALLUCINATIONS, DISORGANIZED SPEECH) DURING PAST MONTH, OR IF IN RESIDUAL PHASE OF SCHIZOPHRENIA.

103. Are there any other things that you have been especially afraid of, like heights, seeing blood, closed places, or certain kinds of animals?

What are you afraid could happen when _____?

A. A persistent fear of a circumscribed stimulus (object or situation), other than of having a panic attack (as in Panic Disorder) or of humiliation or embarrassment in certain social situations (as in Social Phobia).

DK 01 02 03

GO TO
OBS-
COMP.
F.21

PHOBIC OBJECT(S) OR SITUATIONS(S). Circle:

104.
105.
106.
107.
108.

animals	N	Y
heights	N	Y
closed spaces	N	Y
blood/injury	N	Y
other:	_____	

--	--

109. Did you always feel anxious when you (CONFRONTED PHOBIC STIMULUS)?

B. During some phase of the disturbance, exposure to the specific phobic stimulus (or stimuli) almost invariably provokes an immediate anxiety response.

DK 01 02 03

GO TO
OBS-
COMP.
F.21

110. Did you go out of your way to avoid _____?

C. The object or situation is avoided, or endured with intense anxiety.

DK 01 02 03

IF NO: How hard was it for you to _____?

GO TO OBS-
COMP. F.21

111. IF NOT OBVIOUS: How important was it to you to be able to _____?

D. The fear or the avoidant behavior interferes with occupational functioning or with usual social activities or relationships with others, or there is marked distress about having the fear.

DK 01 02 03

GO TO OBS-
COMP. F.21

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

112. Did you think that you were more afraid of _____ than you should have been (or than made sense)?

E. The individual recognizes that his or her fear is excessive or unreasonable.

DK 01 02 03

GO TO
OBS-
COMP.
F.21

113. IF NOT ALREADY CLEAR: RETURN TO THIS ITEM AFTER COMPLETING SECTION ON OBSESSIVE COMPULSIVE DISORDER.

F. The phobic stimulus is unrelated to the content of the obsessions of Obsessive Compulsive Disorder.

DK 01 02 03

GO TO
OBS-
COMP.
F.21

SIMPLE PHOBIA CRITERIA A, B, C, D, E, AND F ARE CODED "03"

DK 01 03

GO TO	SIMPLE
OBS-	PHOBIA
COMP.	
F.21	

CHRONOLOGY

115. IF UNCLEAR: During the past month, have you been bothered by (SIMPLE PHOBIA)?

Has met criteria for Simple Phobia during past month

DK 01 03

116. When were you last bothered by (SIMPLE PHOBIA)?

Number of months prior to interview when last had a symptom of Simple Phobia

--	--	--

117. During the past five years, how much of the time have you been bothered by (SIMPLE PHOBIA)?

Duration in months during past five years that any symptoms of Simple Phobia were present

--	--

118. How old were you when you first were bothered by (SIMPLE PHOBIA)?

Age at onset of Simple Phobia

--	--

OBSESSIVE COMPULSIVE DISORDER

OBSESSIVE COMPULSIVE DISORDER
CRITERIA

A. Either obsessions or compulsions:

119. Now I would like to ask you if you have ever been bothered by thoughts that didn't make any sense and kept coming back to you even when you tried not to have them?

Obsessions: (1), (2), (3), and (4):

(1) Recurrent and persistent ideas, thoughts, impulses, or images that are experienced as intrusive, unwanted, and senseless or repugnant (at least initially).

DK 01 02 03

120. IF YES: DISTINGUISH FROM BROODING ABOUT PROBLEMS (SUCH AS HAVING A PANIC ATTACK) OR ANXIOUS RUMINATION ABOUT REALISTIC DANGERS: What were they? (What about awful thoughts, like actually hurting someone even though you didn't want to, or being contaminated by germs or dirt?)

(2) The individual attempts to ignore or suppress them or to neutralize them with some other thought or action.

DK 01 02 03

121. (What about awful thoughts, like actually hurting someone even though you didn't want to, or being contaminated by germs or dirt?)

(3) The individual recognizes that the obsessions are the product of his or her own mind and not imposed from without (as in thought insertion).

DK 01 02 03

122.

(4) If another Axis I disorder is present, the content of the obsession is unrelated to it, i.e., do not include thoughts about food in the presence of an Eating Disorder, thoughts about drugs in the presence of a Psychoactive Substance Use Disorder, or guilty thoughts in the presence of a Major Depression.

DK 01 02 03

OBSES-
SIONS

DESCRIBE:

(continue to next page)

123.	 Was there anything that you had to do over and over again and couldn't resist doing, like washing your hands again and again, or checking something several times to make sure you'd done it right?	Compulsions: (1), (2) and (3): (1) Repetitive, purposeful, and intentional behavior that is performed according to certain rules or in a stereotyped fashion.	DK 01 02 03 _____
124.	IF YES: What did you have to do? (What were you afraid would happen if you didn't do it?) (How many times did you have to _____? How much time did you spend each day _____?)	(2) The behavior is not an end in itself, but is designed to neutralize or prevent discomfort or some dreaded event or situation. However, either the activity is not connected in a realistic way with what it is designed to neutralize or prevent, or it is clearly excessive.	DK 01 02 03 _____
125.	IF UNCLEAR: Do you think that you (DO COMPULSIVE BEHAVIOR) more than you should? (Do you think [COMPULSION] makes sense?)	(3) The individual recognizes that the behavior is excessive or unreasonable.	DK 01 02 03 _____

COMPULSIONS

DESCRIBE:

IF NEITHER OBSESSIONS NOR COMPULSIONS, GO TO GAO, F. 24. OTHERWISE, CONTINUE.

126. What effect did this (OBSESSION OR COMPULSION) have on your life? (Did _____ bother you a lot?)

(How much time do you spend [OBSESSION OR COMPULSION])?

(Did anyone in your family, or your friends, have to go out of their way because of your [OBSESSION OR COMPULSION])?

B. The obsessions or compulsions cause marked distress, or are time-consuming (take more than an hour a day), or interfere with occupational functioning or with usual social activities or relationships with others.

DESCRIBE:

DK 01 02 03

GO TO GAD	
F. 24	

127.

OBSESSIVE COMPULSIVE DISORDER CRITERIA A AND B ARE CODED "03"

01 03

GO TO	OBSES-
GAD,	SIVE
F. 24	COMPUL-
	SIVE
	DISOR-
	DER

CHRONOLOGY

128. IF UNCLEAR: During the past month, did the (OBSESSIONS OR COMPULSIONS) have any effect on your life or bother you a lot?

Has met criteria for Obsessive Compulsive Disorder during past month (criteria A and B)

DK 01 02 03

129. When were you last bothered by (ANY OBSESSIONS OR COMPULSIONS)?

Number of months prior to interview when last had symptoms of Obsessive Compulsive Disorder

--	--	--

130. During the past five years, how much of the time have you been bothered by (OBSESSIONS OR COMPULSIONS)?

Duration in months during past five years that any symptoms of Obsessive Compulsive Disorder were present

--	--

131. How old were you when the (OBSESSIONS OR COMPULSIONS) first had any effect on your life or bothered you a lot?

Age at onset of Obsessive Compulsive Disorder (criteria A and B)

--	--

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

**GENERALIZED ANXIETY DISORDER
(CURRENT ONLY)**

**GENERALIZED ANXIETY DISORDER
CRITERIA**

SKIP IF A CURRENT MOOD DISORDER IS PRESENT, OR IF PSYCHOTIC (DELUSIONS, HALLUCINATIONS, DISORGANIZED SPEECH) DURING PAST MONTH, OR IF IN RESIDUAL PHASE OF SCHIZOPHRENIA.

132. Do you worry a lot about bad things that might happen?

IF YES: What do you worry about? (How realistic is that?)

During the last six months, would you say that you have been worrying most of the time (more days than not)?

A. During the last six months, the individual has been bothered more days than not by unrealistic or excessive worry (apprehensive expectation) about two or more life circumstances, e.g., worry about possible misfortune to child (who is in no danger) and worry about finances (for no good reason). In children and adolescents, this may take the form of worrying about academic, athletic, and social performance.

DK 01 02 03

GO TO
NEXT
MODULE

133. CODE BASED ON PREVIOUS INFORMATION. REVISE AT END OF INTERVIEW IF NECESSARY.

B. If another Axis I disorder is present, the focus of the worry in "A" above is unrelated to it, e.g., the worry is not about having a panic attack (as in Panic Disorder), being contaminated (as in Obsessive-Compulsive Disorder), or gaining weight (as in Anorexia Nervosa).

DK 01 02 03

GO TO
NEXT
MODULE

Now I am going to ask you some questions about other symptoms that often go along with being nervous. Thinking about how you have felt during the last six months...

C. At least six of the following eighteen symptoms have often been present when anxious during the past six months (DO NOT INCLUDE SIX PRESENT ONLY DURING PANIC ATTACKS):

Motor tension

134. ...do you often tremble, twitch or feel shaky?

(1) trembling, twitching or feeling shaky

DK 01 02 03

135. ...do your muscles often feel tense, sore or achy?

(2) muscle tension, aches or soreness

DK 01 02 03

DK= inadequate information 01= absent or false 02= subthreshold 03= threshold or true

- | | | | | | | |
|--------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------|----|----|----|----|
| 136. | ...do you often feel physically restless--can't sit still? | (3) restlessness | DK | 01 | 02 | 03 |
| 137. | ...do you often tire easily? | (4) easy fatigability | DK | 01 | 02 | 03 |
| <u>Autonomic hyperactivity</u> | | | | | | |
| 138. | ...do you often feel short of breath? (have trouble getting your breath?) | (5) shortness of breath or smothering sensations | DK | 01 | 02 | 03 |
| 139. | ...does your heart often pound or race? | (6) palpitations or accelerated heart rate (tachycardia) | DK | 01 | 02 | 03 |
| 140. | ...do you often sweat a lot? Are your hands often cold or clammy? | (7) sweating, or cold, clammy hands | DK | 01 | 02 | 03 |
| 141. | ...does your mouth often feel dry? | (8) dry mouth | DK | 01 | 02 | 03 |
| 142. | ...do you often feel dizzy or lightheaded? | (9) dizziness or lightheadedness | DK | 01 | 02 | 03 |
| 143. | ...is your stomach often upset, or do you have nausea or diarrhea? | (10) nausea, diarrhea or other abdominal distress | DK | 01 | 02 | 03 |
| 144. | ...do you often have flushes (hot flashes) or chills? | (11) flushes (hot flashes) or chills | DK | 01 | 02 | 03 |
| 145. | ...do you urinate more often than usual? | (12) frequent urination | DK | 01 | 02 | 03 |
| 146. | ...do you often have trouble swallowing, or get a lump in your throat? | (13) trouble swallowing or lump in throat | DK | 01 | 02 | 03 |
| <u>Vigilance and scanning</u> | | | | | | |
| 147. | ...do you often feel keyed up or on edge? | (14) feeling keyed up or on edge | DK | 01 | 02 | 03 |

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or tr

- | | | | | | | |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|
| 148. | ...do sudden noises often startle you? | (15) exaggerated startle response | DK | 01 | 02 | 03 |
| 149. | ...are you often so nervous you have trouble concentrating? | (16) difficulty concentrating or mind going blank because of anxiety | DK | 01 | 02 | 03 |
| 150. | ...do you often have trouble falling or staying asleep? | (17) trouble falling or staying asleep | DK | 01 | 02 | 03 |
| 151. | ...are you often irritable or especially impatient? | (18) irritability | DK | 01 | 02 | 03 |
| 152. | | AT LEAST SIX "C" SXS ARE CODED "03" | | 01 | | 03 |
| | | | | <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> GO TO
NEXT
MODULE </div> | | |
| 153. | When did all this begin? | Age at onset of Generalized Anxiety Syndrome | | <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> | | |
| 154. | CODE BASED ON PREVIOUS INFORMATION. | D. The disturbance does not occur only during the course of a Mood Disorder or a psychotic disorder. | DK | 01 | | 03 |
| | | | | <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> GO TO
NEXT
MODULE </div> | | |
| 155. | Have you been taking any drugs? Have you been physically ill?

IF YES: EXPLORE POSSIBLE RELATIONSHIP BETWEEN ORGANIC FACTOR AND ANXIETY | E. Not sustained by a specific organic factor (e.g., hyperthyroidism, Caffeine intoxication). | DK | 01 | | 03 |
| | | | | <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> GO TO
NEXT
MODULE </div> | | |

156.

GENERALIZED ANXIETY CRI-
TERIA A, B, C, D AND E
ARE CODED "03"

01	02
GO TO	GEN
NEXT	ERA
MODULE	IZE
	ANX
	IET
	DIS
	ORD

SOMATOFORM DISORDERS

SKIP TO NEXT MODULE IF PSYCHOTIC (DELUSIONS, HALLUCINATIONS, DISORGANIZED SPEECH) DURING PAST MONTH, OR IF IN RESIDUAL PHASE OF SCHIZOPHRENIA.

SCREENING QUESTIONS

NOTES

Over the last several years, what has your physical health been like?

How often have you had to go to a doctor because you weren't feeling well? (What for?)

(Was the doctor always able to find out what was wrong, or were there times when the doctor said there was nothing wrong, but you were still convinced that something was wrong?)

(Do you worry much about your physical health? Does your doctor think you worry too much?)

IF NOTHING SUGGESTS THE POSSIBILITY OF A SOMATOFORM DISORDER, CHECK HERE AND GO TO NEXT MODULE - Adjustment Disorder

INTERVIEWER CHECKPOINT

SOMATIZATION DISORDER (CURRENT ONLY)

SOMATIZATION CRITERIA

1. How old were you when you first started to have a lot of physical problems or illnesses?

A. The predominant disturbance is many physical complaints or a belief that he or she has been sickly, for several years and beginning before the age of 30.

DK 01 02 03

GO TO HYPochondriaSIS, IG. 6

2.

Age at onset

Two empty boxes for age at onset

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

FOR EACH SYMPTOM REPORTED, DETERMINE THAT THE FOUR CRITERIA FOR SIGNIFICANCE ARE MET BY SUCH QUESTIONS AS:

Did you tell a doctor about (SYMPTOM)?

What was his diagnosis? (What did he say was causing it?)

Did he find anything abnormal when he took tests or x-rays?

When you had (SYMPTOM) were you taking any medicine, drugs or alcohol?

IF HAS HAD PANIC ATTACKS: Was that only when you were having a panic attack?

Did you take any medicine for it?

Did it interfere with your life a lot?

B. At least 13 symptoms from the list of symptoms below. To count a symptom as significant, the following criteria must be met:

1. no organic pathology or patho-physiologic mechanism (e.g., a physical disorder or the effects of injury, medication, drugs or alcohol) has been found to account for the symptom, or when there is related organic pathology, the complaint or resulting social or occupational impairment is grossly in excess of what would be expected from the physical findings

2. not occurring only during a panic attack

3. has caused the individual to take medicine (other than aspirin), see a doctor, or alter lifestyle

SYMPTOM LIST

Now I am going to ask about specific physical symptoms you may have had.

Have you ever had a lot of trouble with...

Gastrointestinal

3. ..vomiting (when you weren't pregnant)?

(1) vomiting (other than during pregnancy)

DK 01 02

4. ..abdominal or belly pain (not counting times when you were menstruating)?

(2) abdominal pain (other than when menstruating)

DK 01 02

5. ..nausea—feeling sick to your stomach but not actually vomiting?

(3) nausea (other than motion sickness)

DK 01 02

6. ..excessive gas or bloating of your stomach or abdomen?

(4) bloating (gassy)

DK 01 02

7. ..loose bowels or diarrhea

(5) diarrhea

DK 01 02

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or t

8. Have there been any foods that you couldn't eat because they made you sick? What are they?

(6) intolerance of (gets sick on) several different foods

DK 01 02 03

Have you ever had...

Pain

9. ..pain in your arms or legs other than in the joints?

(7) pain in extremities

DK 01 02 03

10. ..a lot of trouble with back pain?

(8) back pain

DK 01 02 03

11. ..pain in your joints?

(9) joint pain

DK 01 02 03

12. ..pain when you urinate?

(10) pain during urination

DK 01 02 03

13. ..pain anywhere else (other than headaches)?

(11) other pain (other than headaches)

DK 01 02 03

Cardiopulmonary (other than during panic attacks)

Have you ever been bothered by...

14. ..shortness of breath

(12) shortness of breath when not exerting oneself

DK 01 02 03

15. ..your heart race, pound or skip?

(13) palpitations

DK 01 02 03

16. ..chest pain?

(14) chest pain

DK 01 02 03

17. ..dizziness?

(15) dizziness

DK 01 02 03

Conversion or pseudoneurological (other than during panic attacks)

Have you ever...

18. ..had a period of amnesia, that is, a period of several hours or days when you couldn't remember anything afterwards about what happened during that time?

(16) amnesia

DK 01 02 03

19. ..had trouble swallowing?

(17) difficulty swallowing

DK 01 02 03

20. ..lost your voice for more than a few minutes?

(18) loss of voice

DK 01 02 03

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

Have you ever...

- | | | | | | | |
|-----|------------------------------------------------------------------------------------------------------------|------------------------------------------------|----|----|----|----|
| 21. | ..been completely deaf for a period of time? | (19) deafness | DK | 01 | 02 | 03 |
| 22. | ..had double vision for a period of time? | (20) double vision | DK | 01 | 02 | 03 |
| 23. | ..had blurred vision (when you didn't need glasses)? | (21) blurred vision | DK | 01 | 02 | 03 |
| 24. | ..been completely blind for more than a few seconds? | (22) blindness | DK | 01 | 02 | 03 |
| 25. | ..had fainting spells or been unconscious? | (23) fainting or loss of consciousness | DK | 01 | 02 | 03 |
| 26. | ..had a seizure or convulsion? | (24) seizure or convulsion | DK | 01 | 02 | 03 |
| 27. | ..had trouble walking? | (25) trouble walking | DK | 01 | 02 | 03 |
| 28. | ..been paralyzed or had periods of weakness when you couldn't lift or move things that you could normally? | (26) paralysis or muscle weakness | DK | 01 | 02 | 03 |
| 29. | ..been completely unable to urinate for a whole day (other than after childbirth or surgery)? | (27) urinary retention or difficulty urinating | DK | 01 | 02 | 03 |

Psychosexual symptoms for the major part of individual's life after opportunities for sexual activity

Now I'm going to ask you some questions about sex.

- | | | | | | | |
|-----|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----|----|----|----|
| 30. | Have you ever had a burning sensation in your sexual organs or rectum (other than during intercourse)? | (28) burning sensation in sexual organs or rectum (other than during intercourse) | DK | 01 | 02 | 03 |
| 31. | Would you say that your sex life has been important to you or could you have gotten along as well without it? | (29) sexual indifference | DK | 01 | 02 | 03 |
| 32. | Has having sex often been physically painful for you? | (30) pain during intercourse | DK | 01 | 02 | 03 |
| 33. | FOR MEN: Have you often had any other sexual problem, like not being able to have an erection? | (31) impotence | DK | 01 | 02 | 03 |

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

Female reproductive symptoms judged by the individual to occur more frequently or severely than in most women

- | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------|----|----|----|----|
| 34. | Other than during your first year of menstruation, have you had very painful periods? | (32) painful menstruation | DK | 01 | 02 | 03 |
| 35. | IF YES: More than most women? | | | | | |
| | | | | N | Y | |
| 36. | Other than during your first year of menstruation (or during menopause), have you had irregular periods? | (33) irregular menstrual periods | DK | 01 | 02 | 03 |
| 37. | IF YES: More than most women? | | | | | |
| | | | | N | Y | |
| 38. | What about too much bleeding during your periods? | (34) excessive menstrual bleeding | DK | 01 | 02 | 03 |
| 39. | IF YES: More than most women? | | | | | |
| | | | | N | Y | |
| 40. | IF HAS GIVEN BIRTH: Did you vomit throughout any pregnancy? | (35) vomiting throughout pregnancy | DK | 01 | 02 | 03 |
| 41. | | AT LEAST 13 "B" SXS ARE CODED "03" | | | 01 | 03 |
| 42. | | SOMATIZATION DISORDER CRITERIA A AND B ARE CODED "03" | 01 | | 03 | |

SOMATIZA-
TION DIS-
ORDER

**HYPOCHONDRIASIS
(CURRENT ONLY)**

HYPOCHONDRIASIS CRITERIA

43. What part(s) of your body bother you?
When did you first have this trouble?
What do you think is wrong? (Do you think that these could be due to a serious physical disease?)

A. The predominant disturbance is preoccupation with the fear of having, or the belief that one has, a serious disease, based on the individual's interpretation of physical signs or sensations as evidence of physical illness. (DO NOT INCLUDE MISINTERPRETATION OF PHYSICAL SIGNS OF PANIC ATTACK.)

DK 01 02 03

_____|_____
|GO TO |
|UNDIFF. |
|SOMATO- |
|FORM, |
|G. 8 |
|_____ |

DESCRIBE:

44. Have you been to a doctor for these symptoms?
What tests were done?
What did the doctor say was wrong?

B. Appropriate physical evaluation does not support the diagnosis of any physical disorder that can account for the physical signs or sensations or the individual's unwarranted interpretation of them, AND the symptoms in "A" are not only symptoms of panic attacks.

DK 01 02 03

_____|_____
|GO TO |
|UNDIFF. |
|SOMATO- |
|FORM, |
|G. 8 |
|_____ |

45. Were you reassured by what the doctor said? (Did you feel better when he told you that ...?)

C. The fear of having, or belief that one has a disease, persists despite medical reassurance.

DK 01 02 03

_____|_____
|GO TO |
|UNDIFF. |
|SOMATO- |
|FORM, |
|G. 8 |
|_____ |

46. (When did all this begin?)

D. Duration of the disturbance is at least six months.

DK 01 02 03

_____|_____
|GO TO |
|UNDIFF. |
|SOMATO- |
|FORM, |
|G. 8 |
|_____ |

47.

Age at onset

DK =inadequate information 01 =absent or false 02 =subthreshold 03 =threshold or t

48.

HYPOCHONDRIASIS CRITERIA
A, B, C, AND D ARE CODED
"03"

01 03

GO TO	HYPO-
UNDIFF.	CHON-
SOMATO-	DRIA-
FORM,	SIS
G. 8	

UNDIFFERENTIATED SOMATOFORM DISORDER (CURRENT ONLY)

UNDIFFERENTIATED SOMATOFORM DISORDER CRITERIA

49.

INFORMATION OBTAINED FROM OVERVIEW OF PRESENT ILLNESS AND SOMATOFORM SCREENING QUESTIONS WILL USUALLY BE SUFFICIENT TO CODE THESE ITEMS. ASK ADDITIONAL QUESTIONS IF NECESSARY.

A. The predominant disturbance is multiple physical complaints, e.g., pain, fatigue, loss of appetite.

DK 01 02 03

GO TO
NEXT
MODULE

DESCRIBE:

50.

B. Either (1) or (2):

DK 01 02 03

(1) after appropriate evaluation, no organic pathology or pathophysiologic mechanism (e.g., a physical disorder or the effects of injury, medication, drugs or alcohol) has been found to account for the physical complaints

51.

(2) when there is related organic pathology, the physical complaints or resulting social or occupational impairment are grossly in excess of what would be expected from the physical findings

DK 01 02 03

GO TO
NEXT
MODULE

52.

(When did all this begin?)

C. Duration of the disturbance is at least six months.

DK 01 02 03

GO TO
NEXT
MODULE

53.

Age at onset

--	--

54.

D. Not occurring only during the course of another Somatoform Disorder, a Sexual Dysfunction, Mood Disorder, Anxiety Disorder, Sleep Disorder or psychotic disorder.

DK 01 02 03

GO TO
NEXT
MODULE

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or t

55.

UNDIFFERENTIATED SOMATOFORM
DISORDER CRITERIA A, B, C,
AND D ARE CODED "03"

01 03

GO TO	UNDIFF.
NEXT	SOMATO-
MODULE	FORM
	DISOR-
	DER

ADJUSTMENT DISORDER (CURRENT ONLY)

THIS SECTION SHOULD BE SKIPPED IF THE CURRENT DISTURBANCE MEETS THE CRITERIA FOR ANY SPECIFIC AXIS I DSM-III DIAGNOSIS

INFORMATION OBTAINED FROM OVERVIEW OF PRESENT ILLNESS WILL USUALLY BE SUFFICIENT TO RATE THE CRITERIA

**ADJUSTMENT DISORDER
CRITERIA**

- | | | | |
|----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | (Do you think that [STRESSOR] had anything to do with your getting [SYMPTOMS]?) | A. A reaction to an identifiable psychosocial stressor, that occurs within three months of the onset of the stressor. | DK 01 02 03 |
| | | DESCRIBE: | <div style="border: 1px solid black; padding: 5px; text-align: center;">
 GO TO
 NEXT
 MODULE
 </div> |
| 2. | (What effect has [SYMPTOMS] had on you and your ability to do things?) | B. The maladaptive nature of the reaction is indicated by either of the following:

(1) impairment in occupational functioning or in usual social activities or relationships with others

(2) symptoms that are in excess of a normal and expectable reaction to the stressor | DK 01 02 03 |
| | | | <div style="border: 1px solid black; padding: 5px; text-align: center;">
 GO TO
 NEXT
 MODULE
 </div> |
| 3. | (Have you had this kind of reaction many times before?)

(Were you having these [SYMPTOMS] even before [STRESSOR] happened?) | C. The disturbance is not merely one instance of a pattern of overreaction to stress or an exacerbation of one of the mental disorders previously described. | DK 01 02 03 |
| | | | <div style="border: 1px solid black; padding: 5px; text-align: center;">
 GO TO
 NEXT
 MODULE
 </div> |
| 4. | (How long has it been now since [STRESSOR AND COMPLICATIONS ARISING FROM THE STRESSOR]?) | D. The maladaptive reaction has persisted for at least one week, but not for more than six months after the stressor (and its environmental consequences) has ceased. | DK 01 02 03 |
| | | | <div style="border: 1px solid black; padding: 5px; text-align: center;">
 GO TO
 NEXT
 MODULE
 </div> |

DK=Inadequate information . 01=absent or false 02=subthreshold 03=threshold or true

5. E. The disturbance does not meet the criteria for any specific mental disorder or Uncomplicated Bereavement. DK 01 02 03

GO TO
NEXT
MODULE

6. ADJUSTMENT DISORDER CRITERIA A, B, C, D, AND E ARE CODED "03"

01	03
GO TO	AD-
NEXT	JUST-
MODULE	MENT
	DIS-
	ORDER

7. CODE SUBTYPE BASED ON PREDOMINANT SYMPTOMS
- 01 WITH DEPRESSED MOOD (e.g., depressed mood, tearfulness, hopelessness)
 - 02 WITH ANXIOUS MOOD (e.g., nervousness, worry, jitteriness)
 - 03 WITH MIXED EMOTIONAL FEATURES (e.g., various combinations of anxiety, depression or other emotions)
 - 04 WITH DISTURBANCE OF CONDUCT (conduct in which there is violation of the rights of others or of major age-appropriate societal norms and rules)
 - 05 MIXED DISTURBANCE OF EMOTIONS AND CONDUCT (e.g., depression and disturbance of conduct)
 - 06 WITH WORK (OR ACADEMIC) INHIBITION (inhibition in work or academic functioning in an individual whose previous work or academic functioning has been adequate)
 - 07 WITH WITHDRAWAL (social withdrawal without significant depression or anxious mood)
 - 08 WITH PHYSICAL COMPLAINTS (physical symptoms such as headache, backache, other aches and pains, or fatigue)
 - 09 NOT OTHERWISE SPECIFIED

DK = inadequate information 01 = absent or false 02 = subthreshold 03 = threshold or true

CHRONOLOGY

8. During the past five years, how much of the time have you been bothered by (ANY SX OF ADJUSTMENT DISORDER)?

Duration in months during past five years that any symptoms of Adjustment Disorder were present

--	--

9. How old were you when you first had (SXS OF ADJUSTMENT DISORDER)?

Age at onset of Adjustment Disorder

--	--

ANTISOCIAL PERSONALITY DISORDER

Now I would like to ask you about some things that you may have done or that may have happened to you while you were growing up--that is before you were 15.

ANTISOCIAL PERSONALITY DISORDER CRITERIA

A. Current age at least 18

B. Evidence of conduct disorder with onset before age 15, as indicated by a history of three or more of the following:

- | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----|----|----|----|
| 1. Did you often skip school? | (1) Was often truant | DK | 01 | 02 | 03 |
| 2. Did you often get in trouble at home or at school because you were frequently breaking rules? | (2) Repeated violations of rules at home and/or at school (other than truancy) | DK | 01 | 02 | 03 |
| 3. Were you ever suspended or expelled from school (before you were 15)? (What for?) (Was it more than once?) | (3) Expulsion, or suspension from school more than once for misbehavior | DK | 01 | 02 | 03 |
| 4. Did you ever run away from home and stay overnight?

IF YES: Did you do that more than once before you were 15? With whom were you living at the time? | (4) Ran away from home overnight at least twice while living in parental or parental surrogate home (or once without returning) | DK | 01 | 02 | 03 |
| 5. Were you ever arrested or sent to juvenile court (before you were 15)? (What for?) | (5) Arrested or referred to juvenile court | DK | 01 | 02 | 03 |
| 6. Did you often get in fights (before you were 15)?

IF YES: Did you often start the fights? | (6) Often initiated physical fights | DK | 01 | 02 | 03 |
| 7. IF YES: Did you ever use a weapon (such as a knife or gun) in a fight? | (7) Used a weapon in more than one fight | DK | 01 | 02 | 03 |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

- | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----|----|----|----|
| 8. Did you ever force someone to have sex with you, against their will (before you were 15)? | (8) Forced someone into sexual activity with him or her | DK | 01 | 02 | 03 |
| 9. Did you ever physically harm an animal, like a cat or dog (NOT INCLUDING NORMAL ACTIVITIES OF HUNTING OR FISHING)? | (9) Was physically cruel to animals | DK | 01 | 02 | 03 |
| 10. Did you ever (intentionally) physically harm another person (before you were 15)? | (10) Was physically cruel to other people | DK | 01 | 02 | 03 |
| 11. Did you ever deliberately destroy someone else's property (before you were 15)? | (11) Deliberately destroyed others' property (not including firesetting) | DK | 01 | 02 | 03 |
| 12. How about setting fires? | (12) Deliberately engaged in fire setting | DK | 01 | 02 | 03 |
| 13. Did you lie a lot (before you were 15)? | (13) Deliberately lied (other than to avoid physical or sexual abuse) | DK | 01 | 02 | 03 |
| 14-15. Did you steal things (before you were 15)? | (14) Stole without confrontation of victim on more than one occasion (including forgery) | DK | 01 | 02 | 03 |
| (IF YES: Was that just when no one was around, or did you steal things from people?) | (15) Stole with confrontation of victim (e.g., mugging, purse snatching) | DK | 01 | 02 | 03 |

DK= inadequate information 01=absent or false 02=subthreshold 03=threshold or true

16. Did you often drink or use (16) Regularly used alcohol, DK 01 02 03
 drugs (before you were 15)?
 How about smoking? began early for general
 subculture

(IF YES: How old were you
 when you started?
 How common was that
 in your neighbor-
 hood?)

"B" CRITERION SUMMARY:
 AT LEAST THREE SXs ARE
 CODED 03

01 03

END OF
 SCID-
 NP-V

Now I would like to ask you
 questions about yourself since
 you were 18 (IF LESS THAN 18:
 "...since you were 15").

C. A pattern of irrespon-
 sible and antisocial
 behavior since the age
 of 15 as indicated by
 at least 4 of the fol-
 lowing:

17. How much of the time in
 the last five years were
 you not working?

(1) inability to sustain
 consistent work behav-
 ior, as indicated by
 any of the following
 (Note: include similar
 behavior in academic
 settings if the indi-
 vidual is a student):
 (a) significant unem-
 ployment for six months
 or more in five years
 when expected to work
 and work was available;
 (b) repeated absences
 from work, unexplained
 by physical illness in
 self or family; or
 (c) walking off several
 jobs without realistic
 plans for other jobs

DK 01 02 03

IF MORE THAN SIX MONTHS:
 Why?

When you were working,
 were you often absent?

IF YES: Why?

Did you ever walk off a
 a job without having
 another one to go to?

IF YES: How many times
 did this happen?

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

- | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-----------|
| <p>18. Have you done things that are against the law--even if you weren't caught, like stealing, selling drugs, fencing, pimping, prostitution or committing a felony?</p> <p>Have you ever been arrested?</p> | <p>(2)</p> | <p>failure to conform to social norms with respect to lawful behavior, as indicated by repeatedly performing antisocial acts that are grounds for arrest (whether arrested or not) e.g., destroying property, harassing others, stealing, illegal occupation</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>19. (Since you were 18) have you been in any fights that came to swapping blows?</p> <p>Have you ever hit or thrown things at your (spouse/partner)?</p> <p>Have you ever hit a child, yours or someone else's, so hard that he or she had bruises or had to stay in bed or see a doctor?</p> | <p>(3)</p> | <p>irritability and aggressiveness as indicated by repeated physical fights or assault (not required by one's job or to defend someone or oneself), including spouse or child beating</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>20. Have you ever owed people money and not paid them back?</p> <p>What about not paying child support or not giving money to children that depended on you?</p> | <p>(4)</p> | <p>repeated failure to honor financial obligations, as indicated by defaulting on debts, failure to provide child support, or failure to support other dependents on a regular basis</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>21. Other than being on a vacation, have you ever traveled around without knowing where you were going to stay or work?</p> <p>Was there ever a time when you had no regular place to live?</p> | <p>(5)</p> | <p>failure to plan ahead, or impulsivity, as indicated by one or both of the following:
 (a) traveling from place to place without a pre-arranged job or clear goal for the period of travel or clear idea about when the travel would terminate; or
 (b) lack of a fixed address for a month or more</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

- | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-----------|
| <p>22. Have you done a lot of lying since you were 15?</p> <p>Have you ever used an alias or pretended you were someone else?</p> | <p>(6)</p> | <p>disregard for the truth as indicated by repeated lying, use of aliases, "conning" others for personal profit or pleasure</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>23. Did you ever drive a car when you were drunk?</p> <p>How often have you gotten a ticket for speeding?</p> | <p>(7)</p> | <p>recklessness, as indicated by driving while intoxicated or recurrent speeding, or other reckless behaviors</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>24. IF HAS BEEN A PARENT OR GUARDIAN:</p> <p>Has anyone ever said you weren't taking proper care of a child of yours (or a child you were responsible for)--like not giving enough food or keeping the child clean enough or getting medical care when the child was sick; leaving the child with neighbors because you weren't able to take care of the child at your home; or running out of money to take care of the child because you spent the money on yourself?</p> <p>Has any of these things ever happened?</p> | <p>(8)</p> | <p>if a parent or guardian: lack of ability to function as a responsible parent as evidenced by one or more of the following:
 (a) child's malnutrition;
 (b) child's illness resulting from lack of minimal hygiene standards;
 (c) failure to obtain medical care for a seriously ill child;
 (d) child's dependence on neighbors or nonresident relatives for food or shelter;
 (e) failure to arrange for a caretaker for young child when parent is away from home; or
 (f) repeated squandering, on personal items, of money required for household necessities</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |
| <p>25. What's the longest period of time you were sexually involved with one person without having sex with anyone else?</p> | <p>(9)</p> | <p>has never sustained a totally monogamous relationship for more than one year</p> | <p>DK</p> | <p>01</p> | <p>02</p> | <p>03</p> |

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

26. Do you feel you had a right to (steal, hit, deface/OTHER ANTISOCIAL ACT)?

(10) lack of remorse (feels justified in having hurt, mistreated or stolen from another)

DK 01 02 03

AT LEAST FOUR SXS ARE CODED "3"

01 03

ANTI-SOCIAL P.D.

27.

RECORD ENDING DATE AND TIME:

[][]

/

[][]

month

[][]

day

[][]

hour

:

[][]

minute

A.M.
P.M.

DK=inadequate information 01=absent or false 02=subthreshold 03=threshold or true

IMPACT OF EVENT

DIRECTIONS: BELOW IS A LIST OF COMMENTS MADE BY PEOPLE ABOUT STRESSFUL LIFE EVENTS AND THE CONTEXT SURROUNDING THEM. READ EACH ITEM AND DECIDE HOW FREQUENTLY EACH ITEM WAS TRUE FOR YOU DURING YOUR MOST DIFFICULT PERIOD OF ADJUSTMENT, FOR THE EVENT AND ITS CONTEXT INDICATED EARLIER IN THE INTERVIEW. IF THE ITEM DID NOT OCCUR DURING THIS TIME, CHOOSE THE NOT AT ALL OPTION. MAKE A CHECKMARK ON THE LINE UNDER THE HEADING WHICH BEST DESCRIBES THAT ITEM. PLEASE COMPLETE EACH ITEM.

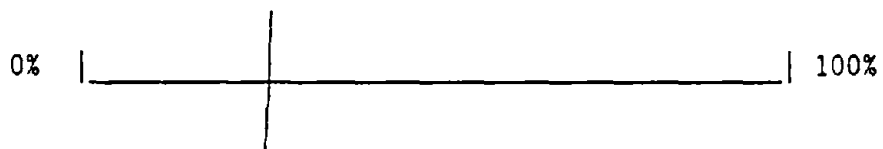
	NOT AT ALL	RARELY	SOME- TIMES	OFTEN
1. I thought about it when I didn't mean to.	___	___	___	___
2. I avoided letting myself get upset when I thought about it or was reminded of it.	___	___	___	___
3. I tried to remove it from memory.	___	___	___	___
4. I had trouble falling asleep or staying asleep, because of pictures or thoughts that came into my mind.	___	___	___	___
5. I had waves of strong feelings about it.	___	___	___	___
6. I had dreams about it.	___	___	___	___
7. I stayed away from reminders of it.	___	___	___	___
8. I felt as if it hadn't happened or wasn't real	___	___	___	___
9. I tried not to talk about it.	___	___	___	___
10. Pictures about it popped into my mind.	___	___	___	___
11. Other things kept making me think about it.	___	___	___	___
12. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	___	___	___	___
13. I tried not to think about it.	___	___	___	___
14. Any reminder brought back feelings about it.	___	___	___	___
15. My feelings about it were kind of numb.	___	___	___	___

DAILY LIFE EXPERIENCES QUESTIONNAIRE

DIRECTIONS

On the following pages are some questions about experiences that you may have in your daily life. We are interested in how often you have these experiences. It is important, however, that your answers show how often these experiences happen to you in your everyday life when you are not under the influence of alcohol or drugs. To answer the questions, please determine to what degree the experience described in the question applies to you and mark the line with a vertical slash at the appropriate place as shown in the example below.

EXAMPLE:



1. Some people have the experience of driving a car and suddenly realizing that they don't remember what has happened during all or part of the trip. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

2. Some people find that sometimes they are listening to someone talk and they suddenly realize that they did not hear part or all of what was just said. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

3. Some people have the experience of finding themselves in a place and they have no idea how they got there. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

4. Some people have the experience of finding themselves dressed in clothes that they don't remember putting on. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

5. Some people have the experience of finding new things among their belongings which they do not remember buying. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

6. Some people sometimes find that they are approached by people that they do not know who call them by another name or insist that they have met them before. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

7. Some people sometimes have the experience of feeling as though they are standing next to themselves or watching themselves do something and they actually see themselves as if they were looking at another person. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

8. Some people are told that they sometimes do not recognize friends or family members. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

9. Some people find that they have no memory for some important events in their lives (for example a wedding or graduation). Mark the line to show what percentage of the important events in your life you have no memory for.

0% | _____ | 100%

10. Some people have the experience of being accused of lying when they do not think that they have lied. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

11. Some people have the experience of looking in a mirror and not recognizing themselves. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

12. Some people sometimes have the experience of feeling that other people, objects, and the world around them are not real. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

13. Some people sometimes have the experience of feeling that their body does not seem to belong to them. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

14. Some people have the experience of sometimes remembering a past event so vividly that they feel as if they were reliving that event. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

15. Some people have the experience of not being sure if things that they remember happening really did happen or whether they just dreamed them. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

16. Some people have the experience of being in a familiar place but finding it strange and unfamiliar. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

17. Some people find that when they are watching television or a movie they become so absorbed in the story that they are unaware of other events happening around them. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

18. Some people sometimes find that they become so involved in a fantasy or daydream that it feels as though it were really happening to them. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

19. Some people find that they sometimes are able to ignore pain. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

20. Some people find that they sometimes sit staring off into space, thinking of nothing and are not aware of the passage of time. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

21. Some people sometimes find that when they are alone they talk outloud to themselves. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

22. Some people find that in one situation they may act so differently compared to another situation that they feel almost as if they were two different people. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

23. Some people sometimes find that in certain situations they are able to do things with amazing ease and spontaneity that would usually be difficult for them (for example, sports, work, social situations etc.). Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

24. Some people sometimes find that they cannot remember whether they have done something or have just thought about doing that thing (for example, not knowing whether they have just mailed a letter or have just thought about mailing it). Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

25. Some people sometimes find evidence that they have done things that they do not remember doing. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

26. Some people sometimes find writings, drawings, or notes among their belongings which they must have done, but cannot remember doing. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

27. Some people sometimes find that they hear voices inside their head which tell them to do things or comment on things that they are doing. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

28. Some people sometimes feel as if they are looking at the world through a fog so that people and objects appear far away or unclear. Mark the line to show what percentage of the time this happens to you.

0% | _____ | 100%

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

S.R. Hathaway and J.C. McKinley

FORM AX TEST BOOKLET

MMPI™

This inventory consists of numbered statements. Read each statement and decide whether it is *true* as applied to you or *false* as applied to you.

You are to mark your answers on the answer sheet you have. Look at the example of the answer sheet shown at the right. If a statement is **true** or **mostly true**, as applied to you, blacken the circle marked **T**. (See A at the right.) If a statement is **false** or **not usually true**, as applied to you, blacken the circle marked **F**. (See B at the right.) If a statement does not apply to you or if it is something that you don't know about, make no mark on the answer sheet. But try to give a response to every statement.

Example Section
of answer sheet
correctly marked

A	<input checked="" type="radio"/>	<input type="radio"/>
B	<input type="radio"/>	<input checked="" type="radio"/>

Remember to give **your own** opinion of yourself.

In marking your answers on the answer sheet, *be sure that the number of the statement agrees with the number on the answer sheet*. Make your marks heavy and black. Erase completely any answer you wish to change. Do not make any marks on this booklet.

Remember, try to respond to every statement.

Now open the booklet and go ahead.

DO NOT MAKE ANY MARKS ON THIS BOOKLET.

1. I like mechanics magazines.
2. I have a good appetite.
3. I wake up fresh and rested most mornings.
4. I think I would like the work of a librarian.
5. I am easily awakened by noise.
6. I like to read newspaper articles on crime.
7. My hands and feet are usually warm enough.
8. My daily life is full of things that keep me interested.
9. I am about as able to work as I ever was.
10. There seems to be a lump in my throat much of the time.
11. People should try to understand their dreams and be guided by or take warning from them.
12. I enjoy detective or mystery stories.
13. I work under a great deal of tension.
14. I have looseness in my bowels (diarrhea) once a month or more.
15. Once in a while I think of things too bad to talk about.
16. I am sure I get a raw deal from life.
17. My father is a good man, or (if your father is dead) my father was a good man.
18. I am very seldom troubled by constipation.
19. When I take a new job, I like to find out who it is important to be nice to.
20. My sex life is satisfactory.
21. At times I have very much wanted to leave home.
22. At times I have fits of laughing and crying that I cannot control.
23. I am troubled by attacks of nausea and vomiting.
24. No one seems to understand me.
25. I would like to be a singer.
26. I feel that it is certainly best to keep my mouth shut when I'm in trouble.
27. Evil spirits possess me at times.
28. When people do me a wrong, I feel I should pay them back if I can, just for the principle of the thing.
29. I am bothered by an upset stomach several times a week.
30. At times I feel like swearing.
31. I have nightmares every few nights.
32. I find it hard to keep my mind on a task or job.
33. I have had very peculiar and strange experiences.
34. I have a cough most of the time.
35. If people had not had it in for me I would have been much more successful.
36. I seldom worry about my health.
37. I have never been in trouble because of my sex behavior.
38. Sometimes when I was young I stole things.
39. At times I feel like smashing things.
40. Most anytime I would rather sit and day-dream than do anything else.
41. I have had periods of days, weeks, or months when I couldn't take care of things because I couldn't "get going."
42. My family does not like the work I have chosen (or the work I intend to choose for my lifework).

43. My sleep is fitful and disturbed.
44. Much of the time my head seems to hurt all over.
45. I do not always tell the truth.
46. My judgment is better than it ever was.
47. Once a week or oftener I suddenly feel hot all over, for no real reason.
48. When I am with people, I am bothered by hearing very strange things.
49. It would be better if almost all laws were thrown away.
50. My soul sometimes leaves my body.
51. I am in just as good physical health as most of my friends.
52. I prefer to pass by school friends, or people I know but have not seen for a long time, unless they speak to me first.
53. A minister or priest can cure disease by praying and putting a hand on your head.
54. I am liked by most people who know me.
55. I am almost never bothered by pains over my heart or in my chest.
56. I was suspended from school one or more times for bad behavior.
57. I am a very sociable person.
58. Everything is turning out just as the prophets of the Bible said it would.
59. I have often had to take orders from someone who did not know as much as I did.
60. I do not read every editorial in the newspaper every day.
61. I have not lived the right kind of life.
62. Parts of my body often have feelings like burning, tingling, crawling, or like "going to sleep."
63. I have had no difficulty in starting or holding my bowel movements.
64. I sometimes keep on at a thing until others lose their patience with me.
65. I love my father, or (if your father is dead) I loved my father.
66. I see things or animals or people around me that others do not see.
67. I wish I could be as happy as others seem to be.
68. I hardly ever feel pain in the back of my neck.
69. I am very strongly attracted by members of my own sex.
70. I used to like drop-the-handkerchief.
71. I think a great many people exaggerate their misfortunes in order to gain the sympathy and help of others.
72. I am troubled by discomfort in the pit of my stomach every few days or oftener.
73. I am an important person.
74. I have often wished I were a girl. (Or if you are a girl) I have never been sorry that I am a girl.
75. I get angry sometimes.
76. Most of the time I feel blue.
77. I enjoy reading love stories.
78. I like poetry.
79. My feelings are not easily hurt.
80. I sometimes tease animals.
81. I think I would like the kind of work a forest ranger does.
82. I am easily downed in an argument.
83. Anyone who is able and willing to work hard has a good chance of succeeding.
84. These days I find it hard not to give up hope of amounting to something.
85. Sometimes I am so strongly attracted by the personal articles of others, such as shoes, gloves, etc., that I want to handle or steal them, though I have no use for them.

86. I am certainly lacking in self-confidence.
87. I would like to be a florist.
88. I usually feel that life is worthwhile.
89. It takes a lot of argument to convince most people of the truth.
90. Once in a while I put off until tomorrow what I ought to do today.
91. I do not mind being made fun of.
92. I would like to be a nurse.
93. I think most people would lie to get ahead.
94. I do many things which I regret afterwards (I regret things more or more often than others seem to).
95. I attend religious services almost every week.
96. I have very few quarrels with members of my family.
97. At times I have a strong urge to do something harmful or shocking.
98. I believe in the second coming of Christ.
99. I like to go to parties and other affairs where there is lots of loud fun.
100. I have met problems so full of possibilities that I have been unable to make up my mind about them.
101. I believe women ought to have as much sexual freedom as men.
102. My hardest battles are with myself.
103. I have little or no trouble with my muscles twitching or jumping.
104. I don't seem to care what happens to me.
105. Sometimes when I am not feeling well I am irritable.
106. Much of the time I feel as if I have done something wrong or evil.
107. I am happy most of the time.
108. There seems to be a fullness in my head or nose most of the time.
109. Some people are so bossy that I feel like doing the opposite of what they request, even though I know they are right.
110. Someone has it in for me.
111. I have never done anything dangerous for the thrill of it.
112. I frequently find it necessary to stand up for what I think is right.
113. I believe in law enforcement.
114. Often I feel as if there is a tight band around my head.
115. I believe in a life hereafter.
116. I enjoy a race or game more when I bet on it.
117. Most people are honest chiefly because they are afraid of being caught.
118. In school I was sometimes sent to the principal for bad behavior.
119. My speech is the same as always (not faster or slower, no slurring or hoarseness).
120. My table manners are not quite as good at home as when I am out in company.
121. I believe I am being plotted against.
122. I seem to be about as capable and smart as most others around me.
123. I believe I am being followed.
124. Most people will use somewhat unfair means to gain profit or an advantage rather than to lose it.
125. I have a great deal of stomach trouble.
126. I like dramatics.
127. I know who is responsible for most of my troubles.
128. The sight of blood doesn't frighten me or make me sick.

129. Often I can't understand why I have been so irritable and grouchy.
130. I have never vomited blood or coughed up blood.
131. I do not worry about catching diseases.
132. I like collecting flowers or growing house plants.
133. I have never indulged in any unusual sex practices.
134. At times my thoughts have raced ahead faster than I could speak them.
135. If I could get into a movie without paying and be sure I was not seen I would probably do it.
136. I often wonder what hidden reason another person may have for doing something nice for me.
137. I believe that my home life is as pleasant as that of most people I know.
138. Criticism or scolding hurts me terribly.
139. Sometimes I feel as if I must injure either myself or someone else.
140. I like to cook.
141. My conduct is largely controlled by the customs of those about me.
142. I certainly feel useless at times.
143. When I was a child, I belonged to a group of friends that tried to be loyal through all kinds of trouble.
144. I would like to be a soldier.
145. At times I feel like picking a fist fight with someone.
146. I am never happy unless I am roaming or traveling around.
147. I have often lost out on things because I couldn't make up my mind soon enough.
148. It makes me impatient to have people ask my advice or otherwise interrupt me when I am working on something important.
149. I used to keep a diary.
150. I would rather win than lose in a game.
151. Someone has been trying to poison me.
152. Most nights I go to sleep without thoughts or ideas bothering me.
153. During the past few years I have been well most of the time.
154. I have never had a fit or convulsion.
155. I am neither gaining nor losing weight.
156. I have had periods in which I carried on activities without knowing later what I had been doing.
157. I feel that I have often been punished without cause.
158. I cry easily.
159. I cannot understand what I read as well as I used to.
160. I have never felt better in my life than I do now.
161. The top of my head sometimes feels tender.
162. I resent having anyone trick me so cleverly that I have to admit I was fooled.
163. I do not tire quickly.
164. I like to study and read about things that I am working at.
165. I like to know some important people because it makes me feel important.
166. I am afraid when I look down from a high place.
167. It wouldn't make me nervous if any members of my family got into trouble with the law.
168. There is something wrong with my mind.
169. I am not afraid to handle money.
170. What others think of me does not bother me.

171. It makes me uncomfortable to put on a stunt at a party even when others are doing the same sort of things.
172. I frequently have to fight against showing that I am bashful.
173. I liked school.
174. I have never had a fainting spell.
175. I seldom or never have dizzy spells.
176. I do not have a great fear of snakes.
177. My mother is a good woman, or (if your mother is dead) my mother was a good woman.
178. My memory seems to be all right.
179. I am worried about sex.
180. I find it hard to make talk when I meet new people.
181. When I get bored I like to stir up some excitement.
182. I am afraid of losing my mind.
183. I am against giving money to beggars.
184. I often hear voices without knowing where they come from.
185. My hearing is apparently as good as that of most people.
186. I frequently notice my hand shakes when I try to do something.
187. My hands have not become clumsy or awkward.
188. I can read a long while without tiring my eyes.
189. I feel weak all over much of the time.
190. I have very few headaches.
191. Sometimes, when embarrassed, I break out in a sweat which annoys me greatly.
192. I have had no difficulty in keeping my balance in walking.
193. I do not have spells of hay fever or asthma.
194. I have had attacks in which I could not control my movements or speech but in which I knew what was going on around me.
195. I do not like everyone I know.
196. I like to visit places where I have never been before.
197. Someone has been trying to rob me.
198. I daydream very little.
199. Children should be taught all the main facts of sex.
200. There are persons who are trying to steal my thoughts and ideas.
201. I wish I were not so shy.
202. I believe I am a condemned person.
203. If I were a reporter I would very much like to report news of the theater.
204. I would like to be a journalist.
205. At times it has been impossible for me to keep from stealing or shoplifting something.
206. I am very religious (more than most people).
207. I enjoy many different kinds of play and recreation.
208. I like to flirt.
209. I believe my sins are unpardonable.
210. Everything tastes the same.
211. I can sleep during the day but not at night.
212. My people treat me more like a child than a grown-up.
213. In walking I am very careful to step over sidewalk cracks.
214. I have never had any breaking out on my skin that has worried me.
215. I have used alcohol excessively.
216. There is very little love and companionship in my family as compared to other homes.

217. I frequently find myself worrying about something.
218. It does not bother me particularly to see animals suffer.
219. I think I would like the work of a building contractor.
220. I love my mother, or (if your mother is dead) I loved my mother.
221. I like science.
222. It is not hard for me to ask help from my friends even though I cannot return the favor.
223. I very much like hunting.
224. My parents often objected to the kind of people I went around with.
225. I gossip a little at times.
226. Some of my family have habits that bother and annoy me very much.
227. I have been told that I walk during sleep.
228. At times I feel that I can make up my mind with unusually great ease.
229. I would like to belong to several clubs.
230. I hardly ever notice my heart pounding and I am seldom short of breath.
231. I like to talk about sex.
232. I have been inspired to a program of life based on duty which I have since carefully followed.
233. I have at times stood in the way of people who were trying to do something, not because it amounted to much but because of the principle of the thing.
234. I get mad easily and then get over it soon.
235. I have been quite independent and free from family rule.
236. I brood a great deal.
237. My relatives are nearly all in sympathy with me.
238. I have periods of such great restlessness that I cannot sit long in a chair.
239. I have been disappointed in love.
240. I never worry about my looks.
241. I dream frequently about things that are best kept to myself.
242. I believe I am no more nervous than most others.
243. I have few or no pains.
244. My way of doing things is apt to be misunderstood by others.
245. My parents and family find more fault with me than they should.
246. My neck spots with red often.
247. I have reason for feeling jealous of one or more members of my family.
248. Sometimes without any reason or even when things are going wrong I feel excitedly happy. "on top of the world."
249. I believe there is a Devil and a Hell in afterlife.
250. I don't blame people for trying to grab everything they can get in this world.
251. I have had blank spells in which my activities were interrupted and I did not know what was going on around me.
252. No one cares much what happens to you.
253. I can be friendly with people who do things which I consider wrong.
254. I like to be with a crowd who play jokes on one another.
255. Sometimes in elections I vote for people about whom I know very little.
256. The only interesting part of newspapers is the comic strips.
257. I usually expect to succeed in things I do.
258. I believe there is a God.

259. I have difficulty in starting to do things.
260. I was a slow learner in school.
261. If I were an artist I would like to draw flowers.
262. It does not bother me that I am not better looking.
263. I sweat very easily even on cool days.
264. I am entirely self-confident.
265. It is safer to trust nobody.
266. Once a week or oftener I become very excited.
267. When in a group of people I have trouble thinking of the right things to talk about.
268. Something exciting will almost always pull me out of it when I am feeling low.
269. I can easily make other people afraid of me, and sometimes do for the fun of it.
270. When I leave home I do not worry about whether the door is locked and the windows closed.
271. I do not blame a person for taking advantage of people who leave themselves open to it.
272. At times I am all full of energy.
273. I have numbness in one or more places on my skin.
274. My eyesight is as good as it has been for years.
275. Someone has control over my mind.
276. I enjoy children.
277. At times I have been so entertained by the cleverness of some criminals that I have hoped they would get away with it.
278. I have often felt that strangers were looking at me critically.
279. I drink an unusually large amount of water every day.
280. Most people make friends because friends are likely to be useful to them.
281. I do not often notice my ears ringing or buzzing.
282. Once in a while I feel hate toward members of my family whom I usually love.
283. If I were a reporter I would very much like to report sporting news.
284. I am sure I am being talked about.
285. Once in a while I laugh at a dirty joke.
286. I am never happier than when alone.
287. I have very few fears compared to my friends.
288. I have often wished I were a member of the opposite sex.
289. I am always disgusted with the law when a criminal is freed through the arguments of a smart lawyer.
290. I have done some bad things in the past that I never tell anybody about.
291. At one or more times in my life I felt that someone was making me do things by hypnotizing me.
292. I am likely not to speak to people until they speak to me.
293. Someone has been trying to influence my mind.
294. I have never been in trouble with the law.
295. I liked "Alice in Wonderland" by Lewis Carroll.
296. I have periods in which I feel unusually cheerful without any special reason.
297. I wish I were not bothered by thoughts about sex.
298. If several people find themselves in trouble, the best thing for them to do is to agree upon a story and stick to it.
299. I think that I feel more intensely than most people do.
300. There never was a time in my life when I liked to play with dolls.

301. Life is a strain for me much of the time.
302. Most people will use somewhat unfair means to get ahead in life.
303. I am so touchy on some subjects that I can't talk about them.
304. In school I found it very hard to talk in front of the class.
305. Even when I am with people I feel lonely much of the time.
306. I get all the sympathy I should.
307. I refuse to play some games because I am not good at them.
308. My conduct is largely controlled by the behavior of those around me.
309. I seem to make friends about as quickly as others do.
310. It makes me nervous when people ask me personal questions.
311. I do not feel I can plan my own future.
312. I dislike having people around me.
313. The person who provides temptation by leaving valuable property unprotected is about as much to blame for its theft as the one who steals it.
314. I am not happy with myself the way I am.
315. I get angry when my friends or family give me advice on how to live my life.
316. I think nearly anyone would tell a lie to keep out of trouble.
317. I am more sensitive than most other people.
318. I got many beatings when I was a child.
319. Most people inwardly dislike putting themselves out to help other people.
320. Many of my dreams are about sex.
321. I am easily embarrassed.
322. I worry over money and business.
323. It bothers me when people say nice things about me.
324. I have never been in love with anyone.
325. The things that some of my family have done have frightened me.
326. I don't like hearing other people give their opinions about life.
327. My mother or father often made me obey even when I thought that it was unreasonable.
328. I wish I had a different name.
329. I almost never dream.
330. I have never been paralyzed or had any unusual weakness of any of my muscles.
331. I often have serious disagreements with people who are close to me.
332. Sometimes my voice leaves me or changes even though I have no cold.
333. When things get really bad, I know I can count on my family for help.
334. Peculiar odors come to me at times.
335. I cannot keep my mind on one thing.
336. I easily become impatient with people.
337. I feel anxiety about something or someone almost all the time.
338. I have certainly had more than my share of things to worry about.
339. Most of the time I wish I were dead.
340. Sometimes I become so excited that I find it hard to get to sleep.
341. At times I hear so well it bothers me.
342. I forget right away what people say to me.
343. I usually have to stop and think before I act even in small matters.

344. Often I cross the street in order not to meet someone I see.
345. I often feel as if things are not real.
346. I have a habit of counting things that are not important such as bulbs on electric signs, and so forth.
347. I have no enemies who really wish to harm me.
348. I tend to be on my guard with people who are somewhat more friendly than I had expected.
349. I have strange and peculiar thoughts.
350. I hear strange things when I am alone.
351. I get anxious and upset when I have to make a short trip away from home.
352. I have been afraid of things or people that I knew could not hurt me.
353. I have no dread of going into a room by myself where other people have already gathered and are talking.
354. I am afraid of using a knife or anything very sharp or pointed.
355. Sometimes I enjoy hurting persons I love.
356. I have more trouble concentrating than others seem to have.
357. I have several times given up doing a thing because I thought too little of my ability.
358. Bad words, often terrible words, come into my mind and I cannot get rid of them.
359. Sometimes some unimportant thought will run through my mind and bother me for days.
360. Almost every day something happens to frighten me.
361. I am inclined to take things hard.
362. Sometimes everything makes me want to laugh.
363. At times I have enjoyed being hurt by someone I loved.
364. People say insulting and vulgar things about me.
365. I feel uneasy indoors.
366. I liked playing "house" when I was a child.
367. I am not afraid of fire.
368. I have sometimes stayed away from another person because I feared doing or saying something that I might regret afterwards.
369. Religion gives me no worry.
370. I hate to have to rush when working.
371. I am not unusually self-conscious.
372. I tend to be interested in several different hobbies rather than to stick to one of them for a long time.
373. I feel sure that there is only one true religion.
374. At periods my mind seems to work more slowly than usual.
375. When I am feeling very happy and active, someone who is blue or low will spoil it all.
376. The police are usually honest.
377. At parties I am more likely to sit by myself or with just one other person than to join in with the crowd.
378. I do not like to see women smoke.
379. I very seldom have spells of the blues.
380. When people say silly or ignorant things about something I know about, I try to set them straight.
381. I am often said to be hotheaded.
382. I wish I could get over worrying about things I have said that may have injured other people's feelings.
383. People often disappoint me.
384. I feel unable to tell anyone all about myself.
385. Lightning is one of my fears.

386. I like to keep people guessing what I'm going to do next.
387. The only miracles I know of are simply tricks that people play on one another.
388. I am afraid to be alone in the dark.
389. My plans have frequently seemed so full of difficulties that I have had to give them up.
390. I have often felt bad about being misunderstood when trying to keep someone from making a mistake.
391. I love to go to dances.
392. A windstorm terrifies me.
393. Animals that don't obey should be beaten or kicked.
394. I frequently ask people for advice.
395. The future is too uncertain for a person to make serious plans.
396. Often, even though everything is going fine for me, I feel that I don't care about anything.
397. I have sometimes felt that difficulties were piling up so high that I could not overcome them.
398. I often think, "I wish I were a child again."
399. I am not easily angered.
400. If given the chance I could do some things that would be of great benefit to the world.
401. I have no fear of water.
402. I often must sleep over a matter before I decide what to do.
403. It is great to be living in these times when so much is going on.
404. People have often misunderstood my intentions when I was trying to put them right and be helpful.
405. I have no trouble swallowing.
406. I have often met people who were supposed to be experts who were no better than I.
407. I am usually calm and not easily upset.
408. I am apt to hide my feelings in some things, to the point that people may hurt me without their knowing about it.
409. At times I have worn myself out by undertaking too much.
410. I would certainly enjoy beating criminals at their own game.
411. It makes me feel like a failure when I hear of the success of someone I know well.
412. I do not dread seeing a doctor about a sickness or injury.
413. I deserve severe punishment for my sins.
414. I am apt to take disappointments so keenly that I can't put them out of my mind.
415. If given the chance I would make a good leader of people.
416. It bothers me to have someone watch me at work even though I know I can do it well.
417. I am often so annoyed when someone tries to get ahead of me in a line of people that I speak to that person about it.
418. At times I think I am no good at all.
419. When I was young I often did not go to school even when I should have gone.
420. I have had some very unusual religious experiences.
421. One or more members of my family are very nervous.
422. I have felt embarrassed over the type of work that one or more members of my family have done.
423. I like or have liked fishing very much.
424. I feel hungry almost all the time.
425. I dream frequently.

426. I have at times had to be rough with people who were rude or annoying.
427. I am embarrassed by dirty stories.
428. I like to read newspaper editorials.
429. I like to attend lectures on serious subjects.
430. I am attracted by members of the opposite sex.
431. I worry quite a bit over possible misfortunes.
432. I have strong political opinions.
433. I used to have imaginary companions.
434. I would like to be an auto racer.
435. Usually I would prefer to work with women.
436. People generally demand more respect for their own rights than they are willing to allow for others.
437. It is all right to get around the law if you don't actually break it.
438. There are certain people whom I dislike so much that I am inwardly pleased when they are catching it for something they have done.
439. It makes me nervous to have to wait.
440. I try to remember good stories to pass them on to other people.
441. I like tall women.
442. I have had periods in which I lost sleep over worry.
443. I am apt to pass up something I want to do because others feel that I am not going about it in the right way.
444. I do not try to correct people who express an ignorant belief.
445. I was fond of excitement when I was young.
446. I enjoy gambling for small stakes.
447. I am often inclined to go out of my way to win a point with someone who has opposed me.
448. I am bothered by people outside, on the streets, in stores, etc., watching me.
449. I enjoy social gatherings just to be with people.
450. I enjoy the excitement of a crowd.
451. My worries seem to disappear when I get into a crowd of lively friends.
452. I like to poke fun at people.
453. When I was a child I didn't care to be a member of a crowd or gang.
454. I could be happy living all alone in a cabin in the woods or mountains.
455. I am quite often not in on the gossip and talk of the group I belong to.
456. People shouldn't be punished for breaking laws that they think are unreasonable.
457. I believe that a person should never taste an alcoholic drink.
458. The man who had most to do with me when I was a child (such as my father, step-father, etc.) was very strict with me.
459. I have one or more bad habits that are so strong it is no use fighting against them.
460. I have used alcohol moderately (or not at all).
461. I find it hard to set aside a task that I have undertaken, even for a short time.
462. I have had no difficulty starting or holding my urine.
463. I used to like to play hopscotch and jump rope.
464. I have never seen a vision.
465. I have several times had a change of heart about my lifework.
466. Except by doctor's orders I never take drugs or sleeping pills.
467. I often memorize numbers that are not important (such as automobile licenses, etc.).

468. I am often sorry because I am so irritable and grouchy.
469. I have often found people jealous of my good ideas, just because they had not thought of them first.
470. Sexual things disgust me.
471. In school my marks in classroom behavior were quite regularly bad.
472. I am fascinated by fire.
473. Whenever possible I avoid being in a crowd.
474. I have to urinate no more often than others.
475. When I am cornered I tell that portion of the truth which is not likely to hurt me.
476. I am a special agent of God.
477. If I was in trouble with several friends who were as guilty as I was, I would rather take the whole blame than give them away.
478. I have never been made especially nervous over trouble that any members of my family have gotten into.
479. I do not mind meeting strangers.
480. I am often afraid of the dark.
481. I can remember "playing sick" to get out of something.
482. While in trains, busses, etc., I often talk to strangers.
483. Christ performed miracles such as changing water into wine.
484. I have one or more faults which are so big that it seems better to accept them and try to control them rather than to try to get rid of them.
485. When a man is with a woman he is usually thinking about things related to her sex.
486. I have never noticed any blood in my urine.
487. I feel like giving up quickly when things go wrong.
488. I pray several times every week.
489. I feel sympathetic towards people who tend to hang on to their griefs and troubles.
490. I read the holy writings several times a week.
491. I have no patience with people who believe there is only one true religion.
492. I dread the thought of an earthquake.
493. I prefer work which requires close attention, to work which allows me to be careless.
494. I am afraid of finding myself in a closet or small closed place.
495. I am usually very direct with people I am trying to correct or improve.
496. I have never seen things double that I couldn't get back into focus.
497. I enjoy stories of adventure.
498. It is always a good thing to be frank.
499. I must admit that I have at times been worried beyond reason over something that really did not matter.
500. I readily become one hundred percent sold on a good idea.
501. I usually work things out for myself rather than get someone to show me how.
502. I like to let people know where I stand on things.
503. It is unusual for me to express strong approval or disapproval of the actions of others.
504. I do not try to cover up my poor opinion or pity of people so that they won't know how I feel.
505. I have had periods when I felt so full of pep that sleep did not seem necessary for days at a time.
506. I am a high-strung person.

507. I have frequently worked under people who seem to have things arranged so that they get credit for good work but are able to pass off mistakes onto those under them.
508. I believe my sense of smell is as good as other people's.
509. I sometimes find it hard to stick up for my rights because I am so reserved.
510. Dirt frightens or disgusts me.
511. I have a daydream life about which I do not tell other people.
512. I dislike taking a bath or shower.
513. I think Lincoln was greater than Washington.
514. I like mannish women.
515. In my home we have always had the ordinary necessities (such as enough food, clothing, etc.).
516. Some of my family have quick tempers.
517. I cannot do anything well.
518. I often feel guilty because I pretend to feel more sorry about something than I really do.
519. There is something wrong with my sex organs.
520. I strongly defend my own opinions as a rule.
521. In a group of people I would not be embarrassed to be called upon to start a discussion or give an opinion about something I know well.
522. I have no fear of spiders.
523. I practically never blush.
524. I am not afraid of picking up a disease or germs from doorknobs.
525. I am made nervous by certain animals.
526. The future seems hopeless to me.
527. The members of my family and my close relatives get along quite well.
528. I blush no more often than others.
529. I would like to wear expensive clothes.
530. I am often afraid that I am going to blush.
531. People can pretty easily change my mind even when I have made a decision about something.
532. I can stand as much pain as others can.
533. I am not bothered by a great deal of belching of gas from my stomach.
534. Several times I have been the last to give up trying to do a thing.
535. My mouth feels dry almost all the time.
536. It makes me angry to have people hurry me.
537. I would like to hunt lions in Africa.
538. I think I would like the work of a dressmaker.
539. I am not afraid of mice.
540. My face has never been paralyzed.
541. My skin seems to be unusually sensitive to touch.
542. I have never had any black, tarry-looking bowel movements.
543. Several times a week I feel as if something dreadful is about to happen.
544. I feel tired a good deal of the time.
545. Sometimes I have the same dream over and over.
546. I like to read about history.
547. I like parties and socials.
548. I never attend a sexy show if I can avoid it.
549. I shrink from facing a crisis or difficulty.
550. I like repairing a door latch.
551. Sometimes I am sure that other people can tell what I am thinking.

552. I like to read about science.
553. I am afraid of being alone in a wide-open place.
554. If I were an artist I would like to draw children.
555. I sometimes feel that I am about to go to pieces.
556. I am very careful about my manner of dress.
557. I would like to be a private secretary.
558. A large number of people are guilty of bad sexual conduct.
559. I have often been frightened in the middle of the night.
560. I am greatly bothered by forgetting where I put things.
561. I very much like horseback riding.
562. The one to whom I was most attached and whom I most admired as a child was a woman (mother, sister, aunt, or other woman).
563. I like adventure stories better than romantic stories.
564. I am apt to pass up something I want to do when others feel that it isn't worth doing.
565. I feel like jumping off when I am on a high place.
566. I like movie love scenes.
567. I am so sick of what I have to do every day that I just want to get out of it all.
568. Often I get confused and forget what I want to say.
569. I am very awkward and clumsy.
570. I really like playing rough sports (such as football or soccer).
571. Others criticize me for the way I manage my money.
572. I have recently considered killing myself.
573. I hate my whole family.
574. Some people think it's hard to get to know me.
575. I can express my true feelings only when I drink.
576. I often become very irritable when people interrupt my work.
577. I spend most of my spare time by myself.
578. When people do something that makes me angry I let them know how I feel about it.
579. I usually have a hard time deciding what to do.
580. People do not find me attractive.
581. I often feel I can read other people's minds.
582. Having to make important decisions makes me nervous.
583. Most people I have trusted have turned against me.
584. Others tell me I eat too fast.
585. People are not very kind to me.
586. I often feel that I'm not as good as other people.
587. Once a week or more I get high or drunk.
588. It doesn't bother me much if I miss an appointment I have made.
589. I have had a tragic loss in my life that I know I'll never get over.
590. Sometimes I get so angry and upset I don't know what comes over me.
591. I often find myself thinking back fondly to my childhood.
592. When people ask me to do something I have a hard time saying no.
593. I am never happier than when I am by myself.
594. One of my main faults is that I make promises I know I cannot keep.

595. My life is empty and meaningless.
596. I am very stubborn.
597. I find it difficult to hold down a job.
598. I have made lots of bad mistakes in my life.
599. Sometimes I make myself throw up after eating so I can control my weight.
600. I get angry with myself for giving in to other people so much.
601. I have enjoyed using marijuana.
602. Lately I have thought a lot about killing myself.
603. I like making decisions and assigning jobs to others.
604. Even without my family I know there will always be someone there to take care of me.
605. I hate being alone.
606. At movies, restaurants, or sporting events, I hate to have to stand in line.
607. When I have a job to do, I usually get it done even if I miss out on family or other personal matters.
608. Recently I have been deeply hurt by someone close to me.
609. No one knows it but I have tried to kill myself.
610. Everything is going on too fast around me.
611. I know I am a burden to others.
612. After a bad day, I usually need a few drinks to relax.
613. I know now that I need help for my problems.
614. Much of the trouble I'm having is due to bad luck.
615. At times I can't seem to stop talking.
616. Sometimes I cut or injure myself on purpose without knowing why.
617. I work very long hours even though my job doesn't require this.
618. I usually feel better after a good cry.
619. I forget where I leave things.
620. If I could live my life over again, I would not change much.
621. Mental illness is a sign of weakness.
622. I get very irritable when people I depend on don't get their work done on time.
623. I have a drug or alcohol problem.
624. If I get upset I'm sure to get a headache.
625. I like to drive a hard bargain.
626. I always make it a point to be on time.
627. I hate to admit feeling sick.
628. Most men are unfaithful to their wives now and then.
629. I am not happy with myself the way I am.
630. A person's mother deserves love and respect no matter what she does.
631. I am stricter about right and wrong than most people.
632. Lately I have lost my desire to work out my problems.
633. When I have a problem it helps to talk it over with someone.
634. More than once I have ended an argument by leaving the room.
635. I have gotten angry and broken furniture or dishes when I was drinking.
636. Others always seem to try to take credit for what I do.
637. Ghosts or spirits can influence people for good or bad.
638. I am not responsible for the bad things that are happening to me.

639. I feel helpless when I have to make some important decisions.
640. I always try to be pleasant even when others are upset or critical.
641. I work best when I have a definite deadline.
642. It is important for me to be in control of my life.
643. Most people think they can depend on me.
644. I have become so angry with someone that I have felt as if I would explode.
645. Some kids act as if they want to have sex with adults.
646. I am very uncomfortable around a priest or minister.
647. Terrible thoughts about my family come to me at times.
648. People tell me I have a problem with alcohol, but I disagree.
649. Most people seem to need someone strong to depend on.
650. I never get around to paying my bills on time.
651. People tell me that I talk a lot in my sleep.
652. I always have too little time to get things done.
653. Most people seem to need some help with emotional problems at some time in their lives.
654. My thoughts these days turn more and more to death and the life hereafter.
655. A few moments of quiet and meditation can calm me no matter how upset I am.
656. I often keep and save things that I will probably never use.
657. I change my clothing more than most people do.
658. Buying clothes and nice things makes me feel better.
659. For my health I avoid certain kinds of food.
660. I've been so angry at times that I've hurt someone in a physical fight.
661. I own very little in this world.
662. In everything I do lately I feel that I am being tested.
663. Marriage is not for everyone.
664. I have very little to do with my relatives now.
665. I sometimes seem to hear my thoughts being spoken out loud.
666. When I am sad, visiting with friends can always pull me out of it.
667. My religion is a great comfort to me.
668. Much of what is happening to me now seems to have happened to me before.
669. When my life gets difficult, it makes me want to just give up.
670. I think that sexual matters should be kept to oneself and not discussed with others.
671. I do not really enjoy eating now.
672. I secretly get a thrill out of being punished.
673. I am planning a big change in my life soon.
674. I can't go into a dark room alone even in my own home.
675. I worry a great deal over money.
676. The man should be the head of the family.
677. My daily routine has changed little in the past few months.
678. My main goals in life are within my reach.
679. All my troubles would vanish if only my health were better.
680. I believe that people should keep personal problems to themselves.
681. The only place where I feel relaxed is in my own home.

682. The people I work with are not sympathetic with my problems.
683. I prefer being around old friends and familiar objects to having to face new situations.
684. I am not feeling much pressure or stress these days.
685. It bothers me greatly to think of making changes in my life.
686. Although I am not happy with my life, there is nothing I can do about it now.
687. My greatest problems are caused by the behavior of someone close to me.
688. I hate going to doctors even when I'm sick.
689. I am satisfied with the amount of money I make.
690. I usually have enough energy to do my work.
691. My interest in sex is much less than it used to be.
692. I often wake up early and can't get back to sleep.
693. It is hard for me to get as much sleep as I need.
694. Talking over problems and worries with someone is often more helpful than taking drugs or medicine.
695. I have some habits that are really harmful.
696. It is hard for me to accept compliments.
697. In most marriages one or both partners are unhappy.
698. I almost never lose self-control.
699. When problems need to be solved, I usually let other people take charge.
700. I recognize several faults in myself that I will not be able to change.
701. Sometimes people do not seem to understand what I have just said.
702. It takes a great deal of effort for me to remember what people tell me these days.
703. When I am sad or blue, it is my work that suffers.
704. Most married couples don't show much affection for each other.