QS = QUESTIONNAIRES

QSCAT = BPRS-A

BRIEF PSYCHIATRIC RATING SCAL	E-ANCHORED (BPRS-A):	(Page 1 of 10)
Date of	QSDTC	EVLINT = -P1W
	e point for each item by marking X in the appropriate not not not all questions with "During the past week have	
*1. SOMATIC CONCERN: Degree of concern over present bodily health. Rate the degree to which physical health is perceived as a problem by the patient, whether complaints have a realistic basis or not. Do not rate mere reporting of somatic symptoms. Rate only concern for (or worrying about) physical problems (real or imagined). Rate on the basis of reported (i.e., subjective) information pertaining to the past week.	 1 = Not reported	cal illness concerned, or often concerned, or often concerned of the time nearly all of the time because of severe cerativeness, or
	QSORRES when	QSTESTCD = BPR010
*2. ANXIETY: Worry, fear, or overconcern for present or future. Rate solely on the basis of verbal report of patient's own subjective experiences pertaining to the past week. Do not infer anxiety from physical signs or from neurotic defense mechanisms. Do not rate if restricted to somatic concern.	 1 = Not reported 2 = Very Mild: occasionally feels sorted 3 = Mild: occasionally feels moderate often feels somewhat anxious 4 = Moderate: occasionally feels verifieds moderately anxious 5 = Moderately Severe: often feels very anxious most 7 = Very Severe: feels very anxious 9 = Cannot be assessed adequately formal thought disorder, uncoop marked evasiveness/guardedness 	rely anxious, or ry anxious, or often very anxious t of the time nearly all of the time y because of severe perativeness, or

*Note at end of table.

BRIEF PSYCHIATRIC RATING SCALE-ANCHORED (BPRS-A):

(Page 2 of 10)

3. EMOTIONAL WITHDRAWAL:

Deficiency in relating to the interviewer and to the interview situation. Overt manifestations of this deficiency include poor/absence of eye contact, failure to orient oneself physically toward the interviewer, and a general lack of involvement or engagement in the interview. Distinguish from BLUNTED AFFECT, in which deficits in facial expression, body gesture, and voice pattern are scored. Rate on the basis of observations made during the interview.

2 = Very Mild: e.g., occasionally exhibits poor eye contact 3 = Mild: e.g., as above, but more frequent 4 = Moderate: e.g., exhibits little eye contact, but still seems engaged in the interview and is appropriately responsive to all questions. 5 = Moderately Severe: e.g., stares at floor or orients self away from interviewer, but still seems moderately

1 = Not observed **QSORRES when QSTESTCD = BPR0103**

6 = Severe: e.g., as above, but more persistent or pervasive

engaged.

7 = Very Severe: e.g., appears "spacey" or "out of it" (total absence of emotional relatedness), and is disproportionately uninvolved or unengaged in the interview. (DO NOT SCORE IF EXPLAINED BY DISORIENTATION.)

4. CONCEPTUAL

DISORGANIZATION: Degree of speech incomprehensibility. Include any type of formal thought disorder (e.g., loose associations, incoherence, flight of ideas, neologisms). DO NOT include mere circumstantiality or pressured speech, even if marked. DO NOT rate on the basis of the patient's subjective impressions (e.g., "my thoughts are racing. I can't hold a thought", "my thinking gets all mixed up"). Rate ONLY on the basis of observations made during the interview.

1 = Not observed QSORRES when QSTESTCD = BPR0104
2 = Very Mild: e.g., somewhat vague, but of doubtful clinical significance
3 = Mild: e.g., frequently vague, but the interview is able to progress smoothly; occasional loosening of associations
4 = Moderate: e.g., occasional irrelevant statements, infrequent use of neologisms, or moderate loosening of associations
5 = Moderately Severe: e.g., as above, but more frequent
6 = Severe: formal thought disorder is present for most of the interview, and the interview is severely strained
7 = Very Severe: very little coherent information can be obtained

BRIEF PSYCHIATRIC RATING SCALE-ANCHORED (BPRS-A):

*5. GUILT FEELINGS: Overconcern QSORRES when QSTESTCD = BPR0105 1 = Not reported or remorse for past behavior. 2 = Very Mild: occasionally feels somewhat guilty Rate on the basis of the patient's subjective 3 = Mild: occasionally feels moderately guilty, or experiences of guilt as often feels somewhat guilty evidenced by verbal report 4 = Moderate: occasionally feels very guilty, or often pertaining to the past week. feels moderately guilty Do not infer guilt feelings from 5 = Moderately Severe: often feels very guilty depression, anxiety, or neurotic 6 = Severe: feels very guilty most of the time, or defenses. encapsulated delusion of guilt 7 = Very Severe: agonizing constant feelings of guilt, or pervasive delusion(s) of guilt 9 = Cannot be assessed adequately because of severe formal thought disorder, uncooperativeness, or marked evasiveness/quardedness; or Not assessed ☐ 1 = Not observed QSORRES when QSTESTCD = BPR0106 6. TENSION: Rate motor restlessness (agitation) 2 = Very Mild: e.g., occasionally fidgets observed during the interview. DO NOT rate on the basis of 3 = Mild: e.g., frequently fidgets subjective experiences reported 4 = Moderate: e.g., constantly fidgets, or frequently by the patient. Disregard fidgets, wrings hands and pulls clothing suspected pathogenesis

pace)

□ 5 = Moderately Severe: e.g., constantly fidgets,

6 = Severe: e.g., cannot remain seated (i.e., must

7 = Very Severe: e.g., paces in a frantic manner

wrings hands and pulls clothing

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*Note at end of table.

(e.g., tardive dyskinesia).

7. MANNERISMS AND

POSTURING: Unusual and

unnatural motor behavior. Rate

(Page 4 of 10)

1 = Not observed **QSORRES when QSTESTCD = BPR0107**

2 = Very Mild: odd behavior but of doubtful clinical

only abnormality of movements. Do not rate simple heightened motor activity here. Consider frequency, duration, and degree of bizarreness. Disregard suspected	significance, e.g., occasional unprompted smiling, infrequent lip movements 3 = Mild: strange behavior but not obviously bizarre, e.g., infrequent head-tilting (side to side) in a rhythmic fashion, intermittent abnormal finger movements 4 = Moderate: e.g., assumes unnatural position for a brief period
pathogenesis.	of time, infrequent tongue protrusions, rocking, facial grimacing 5 = Moderately Severe: e.g., assumes and maintains unnatural position throughout interview, unusual movements in several body areas
	 6 = Severe: as above, but more frequent, intense, or pervasive 7 = Very Severe: e.g., bizarre posturing throughout most of the interview, continuous abnormal movements in several body areas
*8. GRANDIOSITY: Inflated	1 = Not reported QSORRES when QSTESTCD = BPR0108
self-esteem (self-confidence), or inflated appraisal of one's talents, powers, abilities,	2 = Very Mild: e.g., is more confident than most people, but of only possible clinical significance
accomplishments, knowledge, importance, or identity. Do not score mere grandiose <i>quality</i>	3 = Mild: e.g., definitely inflated self-esteem or exaggerates talents somewhat out of proportion to the circumstances
of claims (e.g., "I'm the worst sinner in the world," "The	4 = Moderate: e.g., inflated self-esteem clearly out of proportion to the circumstances, or suspected grandiose delusion(s)
entire country is trying to kill me") unless the guilt/ persecution is related to some special exaggerated attributes of	5 = Moderately Severe: e.g., a single (definite) encapsulated grandiose delusion, or multiple (definite) fragmentary grandiose delusions
the individual. Also, the patient must claim exaggerated attributes: e.g., if patient denies	6 = Severe: e.g., a single (definite) grandiose delusion/delusional system, or multiple (definite) grandiose delusions that the patient seems preoccupied with
talents, powers, etc., even if he or she states that <i>others</i> indicate that he/she has these attributes,	7 = Very Severe: e.g., as above, but nearly all conversation is directed toward the patient's gradiose delusion(s)
this item should not be scored. Rate on the basis of reported (i.e., subjective) information	9 = Cannot be assessed adequately because of severe formal thought disorder, uncooperativeness, or marked evasiveness/guardedness; or Not assessed
pertaining to the past week.	*Note at end of table

^{*}Note at end of table.

BRIEF PSYCHIATRIC RATING SCALE-ANCHO	RED		(Page 5 of 10)
*9. DEPRESSIVE MOOD: Subjective report of feeling depressed, blue, "down in the dumps," etc. Rate only degree of reported depression. Do not rate on the basis of inferences concerning depression based upon general retardation and somatic complaints. Rate on the basis of reported (i.e., subjective) information pertaining to the past week.		QSORRES when Q 1 = Not reported 2 = Very Mild: occasionally feels 3 = Mild: occasionally feels mod depressed, or often feels so 4 = Moderate: occasionally feels or often feels moderately de 5 = Moderately Severe: often feels 6 = Severe: feels very depresse 7 = Very Severe: feels very depresse 9 = Cannot be assessed adequate severe formal thought disord uncooperativeness, or mark guardedness; or Not assesses	erately mewhat depressed s very depressed, pressed els very depressed d most of the time ressed nearly all of ately because of der, ed evasiveness/
* 10. HOSTILITY: Animosity, contempt, belligerence, disdain for other people outside the interview situation. Rate solely on the basis of the verbal report of feelings and actions of the patient toward others during the past week. Do not infer hostility from neurotic defenses, anxiety, or somatic complaints.		1 = Not reported 2 = Very Mild: occasionally feels 3 = Mild: often feels somewhat a occasionally feels moderate 4 = Moderate: occasionally feels or often feels moderately an 5 = Moderately Severe: often feels moderately and 6 = Severe: has acted on his and becoming verbally or physical one or two occasions 7 = Very Severe: has acted on his a	angry, or ly angry s very angry, gry els very angry ger by ally abusive on his anger on ately because order, ed evasiveness/

*Note at end of table.

BRIEF PSYCHIATRIC RATING SCALE-ANCHO	RED	(BPRS-A):	(Page 6 of 10)
			QSORRES when QSTESTC	$D = BPR01^{\circ}$
*11. SUSPICIOUSNESS: Belief (delusional or		1 = Not re	ported	
otherwise) that others have now, or have had in the past, malicious or discriminatory intent toward the patient. On the basis of		•	Mild: rare instances of distrustfur may not be warranted by the s	
verbal report, rate only those suspicions which are currently held whether they			occasional instances of suspicio finitely not warranted by the situ	
concern past or present circumstances. Rate on the basis of reported (i.e., subjective) information pertaining to the past week.			rate: more frequent suspiciousn ent ideas of reference	ess, or
			rately Severe: pervasive suspici ent ideas of reference, or an enc on	
		persec	e: definite delusion(s) of referer cution that is (are) not wholly pe an encapsulated delusion)	
		•	Severe: as above, but more wide ent, or intense	espread,
		severe uncoop	ot be assessed adequately beca e formal thought disorder, perativeness, or marked veness/guardedness; or Not ass	

^{*}Note at end of table.

BRIEF PSYCHIATRIC RATING SCALE-ANCHORED (BPRS-A): (Page 7 of 10) QSORRES when QSTESTCD = BPR0112 1 = Not reported *12. HALLUCINATORY BEHAVIOR: Perceptions (in any sensory modality) in 2 = Very Mild: suspected hallucinations only the absence of an identifiable external 3 = Mild: definite hallucinations, but insignificant, stimulus. Rate only those experiences infrequent, or transient (e.g., occasional that have occurred during the last week. formless visual hallucinations, a voice calling DO NOT rate "voices in my head," or the patient's name) "visions in my mind" unless the patient can 4 = Moderate: as above, but more frequent or differentiate between these experiences and extensive (e.g., frequently sees the devil's his or her thoughts. face, two voices carry on lengthy conversations) 5 = Moderately Severe: hallucinations are experienced nearly every day, or are a source of extreme distress 6 = Severe: as above, and has had a moderate impact on the patient's behavior (e.g., concentration difficulties leading to impaired work functioning) 7 = Very Severe: as above, and has had a severe impact (e.g., attempts suicide in response to command hallucinations) 9 = Cannot be assessed adequately because of severe formal thought disorder, uncooperativeness, or marked evasiveness/guardedness; or Not assessed

*Note at end of table.

BRIEF PSYCHIATRIC RATING SCALE-ANCHOR	ED (F	SPRS-A)r
BRIEF TO TOTILATRIO RATING GOALL-AROHOR	בט (נ	QSORRES when QSTESTCD = BPR0113
13. MOTOR RETARDATION: Reduction in energy level evidenced in slowed movements. Rate on the basis of observed behavior of the patient only. Do not rate on the basis of the patient's subjective impression of his or her own energy level.		1 = Not observed
		2 = Very Mild and of doubtful clinical significance
		3 = Mild: e.g., conversation is somewhat retarded, movements somewhat slowed
		4 = Moderate: e.g., conversation is noticeably retarded but not strained
		5 = Moderately Severe: e.g., conversation is strained, moves very slowly
		6 = Severe: e.g., conversation is difficult to maintain, hardly moves at all
		7 = Very Severe: e.g., conversation is almost impossible, does not move at all throughout the interview
		QSORRES when QSTESTCD = BPR0114
14. UNCOOPERATIVENESS: Evidence of		1 = Not observed
resistance, unfriendliness, resentment, and lack of readiness to cooperate with the interviewer. Rate only on the basis of the patient's attitude and responses to the interviewer and the interview situation. Do not rate on the basis of reported resentment or uncooperativeness outside the		2 = Very Mild: e.g., does not seem motivated
		3 = Mild: e.g., seems evasive in certain areas
		4 = Moderate: e.g., monosyllabic, fails to elaborate spontaneously, somewhat unfriendly
		5 = Moderately Severe: e.g., expresses resentment and is unfriendly throughout the interview
interview situation.		6 = Severe: e.g., refuses to answer a number of questions
		7 = Very Severe: e.g., refuses to answer most questions

BRIEF PSYCHIATRIC RATING SCALE-ANCHO	ORED (BPRS-A): QSORRES when QSTESTCD = BPR011
*15. UNUSUAL THOUGHT CONTENT: Severity of delusions of any type - consider conviction and effect on actions. Assume full conviction if patient has acted on his or her beliefs. Rate on the basis of reported (i.e., subjective) information pertaining to past week.	 □ 1 = Not reported □ 2 = Very Mild: delusion(s) suspected or likely □ 3 = Mild: at times, patient questions his or her belief(s) (partial delusion)
16. BLUNTED AFFECT: Diminished affective responsivity, as characterized by deficits in facial expression, body gesture, and voice pattern. Distinguish from EMOTIONAL WITHDRAWAL, in which the focus is on interpersonal impairment rather than affect. Consider degree and consistency of impairment. Rate based on observations made during interview. *Note at end of table.	 QSORRES when QSTESTCD = BPR0116 □ 1 = Not observed □ 2 = Very Mild: e.g., occasionally seems indifferent to material that is usually accompanied by some show of emotion □ 3 = Mild: e.g., somewhat diminished facial expression or somewhat monotonous voice or somewhat restricted gestures □ 4 = Moderate: e.g., as above, but more intense, prolonged, or frequent □ 5 = Moderately Severe: e.g., flattening of affect, including at least two of the three features: severe lack of facial expression, monotonous voice, or restricted body gestures □ 6 = Severe: e.g., profound flattening of affect □ 7 = Very Severe: e.g., totally monotonous voice, and total lack of expressive gestures throughout the evaluation

BRIEF PSYCHIATRIC RATING SCALE-ANCHO	RED	(BPRS-A):	(Page 10 of 10)
		QSORRES	when QSTESTCD = BPR011
17. EXCITEMENT: Heightened emotional tone, including irritability and expansiveness (hypomanic affect). Do not infer affect from statements of grandiose delusions. Rate based on observations made during interview.		1 = Not observed	
		2 = Very Mild and of d significance	oubtful clinical
		3 = Mild: e.g., irritable	or expansive at times
		4 = Moderate: e.g., fre	equently irritable or expansive
			e: e.g., constantly irritable at times, enraged or euphoric
		6 = Severe: e.g., enrag	ged or euphoric throughout ew
			as above, but to such a degree must be terminated prematurely
		QSORRES whe	n QSTESTCD = BPR0118
18. DISORIENTATION: Confusion or lack of proper association for person, place, or time. Rate based on observations made		1 = Not observed	
		2 = Very Mild: e.g., se	ems somewhat confused
during interview		3 = Mild: e.g., indicate	d 1982 when, in fact, it is 1983
		4 = Moderate: e.g., inc	dicates 1978
		5 = Moderately Severe	e: e.g., is unsure where he/she is
		6 = Severe: e.g., has r	no idea where he/she is
		7 = Very Severe: e.g.,	does not know who he/she is
		severe formal thou	s, or marked evasiveness/
*Ratings based primarily upon verbal report.			