The APA is offering a number of "emerging measures" for further research and clinical evaluation. These patient assessment measures were developed to be administered at the initial patient interview and to monitor treatment progress. They should be used in research and evaluation as potentially useful tools to enhance clinical decision-making and not as the sole basis for making a clinical diagnosis. Instructions, scoring information, and interpretation guidelines are provided; further background information can be found in DSM-5. The APA requests that clinicians and researchers provide further data on the instruments' usefulness in characterizing patient status and improving patient care at http://www.dsm5.org/Pages/Feedback-Form.aspx.

Measure: Severity Measure for Panic Disorder—Adult

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Severity Measure for Panic Disorder—Adult

Name:_____ Age: ____ Sex: Male □ Female □ Date:_____

<u>Instructions:</u> The following questions ask about thoughts, feelings, and behaviors about panic attacks. A panic attack is an episode of intense fear that sometimes comes out of the blue (for no apparent reason). The

symptoms of a panic attack include: a racing heart, shortness of breath, dizziness, sweating, and fear of losing control or dying. Please respond to each item by marking (\checkmark or x) one box per row.							
							Clinician Use
	During the PAST 7 DAYS, I have	Never	Occasionally	Half of the time	Most of the time	All of the time	Item score
1.	felt moments of sudden terror, fear or fright, sometimes out of the blue (i.e., a panic attack)	□ 0	1	□ 2	 3	4	
2.	felt anxious, worried, or nervous about having more panic attacks	□ 0	1	□ 2	□ 3	4	
3.	had thoughts of losing control, dying, going crazy, or other bad things happening because of panic attacks	□ 0	1	□ 2	 3	4	
4.	felt a racing heart, sweaty, trouble breathing, faint, or shaky	0 0	1	□ 2	3	4	
5.	felt tense muscles, felt on edge or restless, or had trouble relaxing or trouble sleeping	0 0	1	□ 2	3	4	
6.	avoided, or did not approach or enter, situations in which panic attacks might occur	□ 0	1	□ 2	 3	4	
7.	left situations early, or participated only minimally, because of panic attacks	□ 0	1	□ 2	□ 3	4	
8.	spent a lot of time preparing for, or procrastinating about (putting off), situations in which panic attacks might occur	0 0	1	□ 2	 3	4	
9.	distracted myself to avoid thinking about panic attacks	□ 0	1	□ 2	□ 3	4	
10.	needed help to cope with panic attacks (e.g., alcohol or medication, superstitious objects, other people)	0 0	1	□ 2	3	4	
Total/Partial Raw Score:							
Prorated Total Raw Score: (if 1-2 items left unanswered)							

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Instructions to Clinicians

The Severity Measure for Panic Disorder—Adult is a 10-item measure that assesses the severity of symptoms of panic disorder in individuals age 18 and older. The measure was designed to be completed by an individual upon receiving a diagnosis of panic disorder (or clinically significant panic disorder symptoms) and thereafter, prior to follow-up visits with the clinician. Each item asks the individual receiving care to rate the severity of his or her panic disorder during the past 7 days.

Scoring and Interpretation

Each item on the measure is rated on a 5-point scale (0=Never; 1=Occasionally; 2=Half of the time; 3=Most of the time, and 4=All of the time). The total score can range from 0 to 40, with higher scores indicating greater severity of panic disorder. The clinician is asked to review the score of each item on the measure during the clinical interview and indicate the raw score for each item in the section provided for "Clinician Use." The raw scores on the 10 items should be summed to obtain a total raw score. In addition, the clinician is asked to calculate and use the <u>average total score</u>. The <u>average total score</u> reduces the overall score to a 5-point scale, which allows the clinician to think of the severity of the individual's panic disorder in terms of none (0), mild (1), moderate (2), severe (3), or extreme (4). The use of the average total score was found to be reliable, easy to use, and clinically useful to the clinicians in the DSM-5 Field Trials. The <u>average total score</u> is calculated by dividing the raw total score by number of items in the measure (i.e., 10).

Note: If 3 or more items are left unanswered, the total score on the measure should not be calculated. Therefore, the individual receiving care should be encouraged to complete all of the items on the measure. If 1 or 2 items are left unanswered, you are asked to calculate a prorated score. The prorated score is calculated by summing the scores of items that were answered to get a partial raw score. Multiply the partial raw score by the total number of items on the Severity Measure for Panic Disorder (i.e., 10) and divide the value by the number of items that were actually answered (i.e., 8 or 9). The formula to prorate the partial raw score to Total Raw Score is:

(Raw sum x 10)

Number of items that were actually answered

If the result is a fraction, round to the nearest whole number.

Frequency of Use

To track changes in the severity of the individual's panic disorder over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the individual's symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the individual that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.