

**START NEW CARD  
DUP COL 1 - 10**

MOD.       A     8   [11 - 12]

CARD NO.   0     1   [13 - 14]  
                                    b       [15]

## OCD

(OBSESSIONS)

Some young people have times when one thought or idea comes into their mind over and over again. When people have these thoughts they usually get upset, because the thoughts are strange and no matter how hard they try, the thoughts keep coming back.

Now I'm going to tell you about some of the kinds of thoughts that people can have, and I will ask you whether \_\_\_\_\_ has had thoughts like these in the last year.

1. In the last year – that is, since [[NAME EVENT]/[NAME CURRENT MONTH] of last year] – has [he/she] often seemed worried that things [he/she] touched were dirty or had germs? 0        2        7        9        [16]

**IF NO, GO TO Q 2**

**IF YES, A.** In the last year, was there a time when [he/she] seemed to worry about things being dirty or having germs almost every day? 0        2        7        9        [17]

**IF NO, GO TO Q 2**

B. Did [he/she] seem to worry much more about things being dirty or having germs than other [children/people [his/her] age]? 0        2\*     7        9        [18]

C. Did [he/she] say that [he/she] had these worries when [he/she] was (at [school/work] or when [he/she] was) doing things with [his/her] friends? 0        2\*     7        9        [19]

D. Did having these worries about dirt or germs seem to bother or upset [him/her] a lot? 0        2\*     7        9        [20]

E. Did [he/she] try to make these worries go away? 0        2\*     7        9        [21]

**NOTE 1: WERE 2 OR MORE \* RESPONSES CODED IN B - E?** 0        [2]        [22]

**IF YES: CONTINUE**

**IF NO: GO TO Q 2**

F. Now, what about the last four weeks? 0        2        7        9        [23]  
 Since [[NAME EVENT]/the beginning of/the middle of/the end of [LAST MONTH]], has [he/she] often seemed worried that things around [him/her] were dirty or had germs?

2. Some people keep having thoughts that they will do something very bad in public even though they don't want to do anything bad. For example, they keep thinking that they'll shout out a curse word or that they'll hurt strangers they pass in the street.

In the last year (*that is, since [NAME CURRENT MONTH] of last year*), has [he/she] seemed worried that [he/she] would do something like that? 0 2 7 9 [24]

**IF NO, GO TO Q 3**

IF YES, A. Did [he/she] seem to worry about this over and over again? 0 2 7 9 [25]

**IF NO, GO TO Q 3**

B. In the last year, was there a time when [he/she] seemed to worry about doing something bad almost everyday? 0 2 7 9 [26]

**IF NO, GO TO Q 3**

C. Did [he/she] say [he/she] had these thoughts (when [he/she] was at [school/work] or) when [he/she] was doing things with [his/her] friends? 0 2\* 7 9 [27]

D. Did having these worries about doing something bad seem to bother or upset [him/her] a lot? 0 2\* 7 9 [28]

E. Did [he/she] try to make these worries go away? 0 2\* 7 9 [29]

**NOTE 2: WERE 2 OR MORE \* RESPONSES CODED IN C - E?** 0 [2] [30]

**IF YES: CONTINUE**

**IF NO: GO TO Q 3**

F. Now, what about the last four weeks? 0 2 7 9 [31]  
*(Since [[NAME EVENT]]/the beginning of/the middle of/the end of [LAST MONTH]), has [he/she] often seemed worried that [he/she] would do something bad in public?*

3. During the last year (*that is, since [NAME CURRENT MONTH] of last year*), did [he/she] say that [he/she] had any other thoughts that kept coming back into [his/her] mind over and over again that [he/she] couldn't get rid of? 0 2 7 9 [32]

**IF NO, GO TO INSTRUCTION BOX "a"**

**IF YES, A.** Can you tell me what these thoughts were?  
(INTERVIEWER: GET FULL DESCRIPTION)

\_\_\_\_\_ |\_\_\_\_\_| [33-34]  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

B. In the last year, was there a time when [he/she] had thoughts like this that kept coming back into [his/her] mind almost everyday? 0 2 7 9 [35]

**IF NO, GO TO INSTRUCTION BOX "a"**

C. Did [he/she] say that [he/she] had these thoughts (when [he/she] was at [school/work] or) when [he/she] was doing things with [his/her] friends? 0 2\* 7 9 [36]

D. Did having these worries seem to bother or upset [him/her] a lot? 0 2\* 7 9 [37]

E. Did [he/she] try to make these worries go away? 0 2\* 7 9 [38]

<p><b>NOTE 3: WERE 2 OR MORE * RESPONSES CODED IN C - E?</b></p> <p><b>IF YES: CONTINUE</b> <b>IF NO: GO TO INSTRUCTION BOX "a"</b></p>	0	[2]			[39]
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F. Now, what about the last four weeks? 0 2 7 9 [40]  
 (*Since [[NAME EVENT]]/the beginning of/the middle of/the end of [LAST MONTH]]*), has [he/she] said that [he/she] often had thoughts like this that kept coming back into [his/her] mind?

<p><b>a: IF ANY [ ] RESPONSES WERE CODED IN NOTES 1 - 3, (see tally sheet), CONTINUE</b></p> <p><b>ALL OTHERS, GO TO Q 5</b></p>
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4. You told me that \_\_\_\_\_ [NAME [ ] SYMPTOMS IN NOTES 1 - 3]. In the last year (*that is, since [NAME CURRENT MONTH] of last year*), did [he/she] say that someone or some power had put these thoughts directly into [his/her] head? 0 2 7 9 [41]

(COMPULSIONS)

5. Some people feel that they are never clean enough. They wash their hands or their body over and over again, even though every one else thinks they are clean ... or they keep changing their clothes because they think they're dirty.

In the last year – that is, since [NAME CURRENT MONTH] of last year – was there a time when \_\_\_\_\_ washed [his/her] hands or body over and over again or changed [his/her] clothes many times each day because [he/she] said they were dirty? 0 2 7 9 [42]

**IF NO, GO TO Q 6**

**IF YES, A.** In the last year, was there a time when [he/she] kept washing [his/her] hands or changing [his/her] clothes over and over nearly everyday? 0 2 7 9 [43]

**IF NO, GO TO Q 6**

B. Did having to wash [himself/herself] or change [his/her] clothes so much seem to bother or upset [him/her] a lot? 0 2\* 7 9 [44]

C. Did it seem like it was hard for [him/her] to stop washing [his/her] hands or changing [his/her] clothes? 0 2\* 7 9 [45]

D. Did washing over and over again or changing [his/her] clothes so much make [him/her] late for things or make [him/her] miss doing something [he/she] needed to do? 0 2\* 7 9 [46]

E. Did [he/she] say something bad might happen if [he/she] didn't wash a lot? 0 2\* 7 9 [47]

F. Did washing [his/her] hands or body over and over or changing again and again seem to make [him/her] feel better or be less tense? 0 2\* 7 9 [48]

**NOTE 4: WERE 2 OR MORE \* RESPONSES CODED IN B - F?** 0 [2] [49]

**IF YES: CONTINUE**  
**IF NO: GO TO Q 6**

G. Now, what about the last four weeks? 0 2 7 9 [50]  
*(Since [[NAME EVENT]]/the beginning of/the middle of/the end of [LAST MONTH]), has [he/she] washed [his/her] hands or [his/her] body over and over again or change [his/her] clothes a lot more than other people?*

6. In the last year (*that is, since [NAME CURRENT MONTH] of last year*), has [he/she] checked on things over and over again? For example, checking that the front door is locked ... or the stove is turned off ... or that something else was done even though it had already been done? 0 2 7 9 [51]

**IF NO, GO TO Q 7**

**IF YES,** A. Did [he/she] go and check to make sure more than once? 0 2 7 9 [52]

**IF NO, GO TO Q 7**

B. In the last year, was there a time when [he/she] kept checking on things almost every day? 0 2 7 9 [53]

**IF NO, GO TO Q 7**

C. Do you think [he/she] checked on things much more than other [children/people [his/her] age]? 0 2 7 9 [54]

D. Did checking on things this way seem to bother or upset [him/her] a lot? 0 2\* 7 9 [55]

E. Did it seem like it was hard for [him/her] to stop checking on things when [he/she] wanted to? 0 2\* 7 9 [56]

F. Did having to check on things over and over make [him/her] late for things or make [him/her] miss doing something [he/she] needed to do? 0 2\* 7 9 [57]

G. Did [he/she] say something bad might happen if [he/she] didn't check on things over and over? 0 2\* 7 9 [58]

H. Did checking on things seem to make [him/her] feel better or be less tense? 0 2\* 7 9 [59]

<p><b>NOTE 5: WERE 2 OR MORE * RESPONSES CODED IN D - H?</b></p> <p><b>IF YES: CONTINUE</b> <b>IF NO: GO TO Q 7</b></p>	0	[2]		[60]
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I. Now, what about the last four weeks? (Since [[NAME EVENT]//the beginning of/the middle of/the end of [LAST MONTH]], has [he/she] often checked on things like this? 0 2 7 9 [61]

7. Some people are really bothered by having to count things over and over again or do things a certain number of times.

In the last year (*that is, since [NAME CURRENT MONTH] of last year*), has [he/she] counted certain things over and over again or made [himself/herself] do things a certain number of times? 0 2 7 9 [62]

**IF NO, GO TO Q 8**

**IF YES, A.** In the last year, was there a time when [he/she] counted things over and over or did things a certain number of times nearly everyday? 0 2 7 9 [63]

**IF NO, GO TO Q 8**

B. Did having to count like this or do things a certain number of times seem to bother or upset [him/her] a lot? 0 2\* 7 9 [64]

C. Did it seem like it was hard hard for [him/her] to stop counting or doing things a certain number of times when [he/she] wanted to? 0 2\* 7 9 [65]

D. Did having to count things or do things a certain number of times make [him/her] late for things or make [him/her] miss doing something [he/she] needed to do? 0 2\* 7 9 [66]

E. Did [he/she] say something bad might happen if [he/she] didn't count like that? 0 2\* 7 9 [67]

F. Did counting like that or doing things a certain number of times seem to make [him/her] feel better or be less tense? 0 2\* 7 9 [68]

**NOTE 6: WERE 2 OR MORE \* RESPONSES CODED IN B - F?** 0 [2] [69]

**IF YES: CONTINUE**  
**IF NO: GO TO Q 8**

G. Now, what about the last four weeks? 0 2 7 9 [70]  
*(Since [[NAME EVENT]]/the beginning of/the middle of/the end of [LAST MONTH]), has [he/she] often counted things or done things a certain number of times?*

**START NEW CARD  
 DUP COL 1 - 12**

CARD NO. 0 2 [13 - 14]  
                   b [15]

8. During the last year (*that is, since [NAME CURRENT MONTH] of last year*), were there any other things that \_\_\_\_\_ did over and over again, and that it seemed like [he/she] couldn't stop doing – things like praying over and over ... or touching things a certain number of times or a certain way over and over again until [he/she] felt okay? 0 2 7 9 [16]

**IF NO, GO TO INSTRUCTION BOX "b"**

A. Can you tell me what things like this [he/she] did?

\_\_\_\_\_ [17-18]  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

B. In the last year (*that is, since [NAME CURRENT MONTH] of last year*), was there a time when [he/she] did things like this over and over nearly everyday? 0 2 7 9 [19]

**IF NO, GO TO INSTRUCTION BOX "b"**

C. Did having to do these things seem to bother or upset [him/her] a lot? 0 2\* 7 9 [20]

D. Did it seem like it was hard for [him/her] to stop doing these things when [he/she] wanted to? 0 2\* 7 9 [21]

E. Did having to do these things over and over make [him/her] late for things or make [him/her] miss doing something [he/she] needed to do? 0 2\* 7 9 [22]

F. Did [he/she] say something bad might happen if [he/she] didn't do things like this over and over? 0 2\* 7 9 [23]

G. Did doing these things seem to make [him/her] feel better or be less tense? 0 2\* 7 9 [24]

<p><b>NOTE 7: WERE 2 OR MORE * RESPONSES CODED IN C - G?</b></p> <p><b>IF YES: CONTINUE</b>  <b>IF NO: GO TO INSTRUCTION BOX "b"</b></p>	0	[2]	[25]
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H. Now, what about the last four weeks? 0 2 7 9 [26]  
*(Since [[NAME EVENT]]/the beginning of/the middle of/the end of [LAST MONTH]), has [he/she] often done things like this?*

**b: IF 1 OR MORE [ ] RESPONSE WAS CODED IN NOTES 1 - 7, (see tally sheet), CONTINUE**

**ALL OTHERS, GO TO PTSD, P. 77**

9. You said that \_\_\_\_\_ [NAME [ ] SYMPTOMS IN NOTES 1 - 7]. If you added up all the times in a day [he/she] spent [having these thoughts/doing these things], would it add up to more than an hour? 0 2 7 9 [27]

10. Did [he/she] [have these thoughts/do these things] on most days for as long as two weeks? 0 2 7 9 [28]

11. You said that in the last year [he/she] [NAME [ ] SYMPTOMS IN NOTES 1 - 7].

How old was [he/she] the first time [he/she] [had thoughts like that/did things like that]?

CODE AGE (66 = WHOLE LIFE, ALWAYS) -----> | \_\_\_\_ \_\_\_\_ | YRS. [29-30]

IF AGE NOT KNOWN, ASK: What grade was [he/she] in?

CODE GRADE -----> | \_\_\_\_ \_\_\_\_ | GRADE [31-32]

(44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.)

c: IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE], GO TO Q 12  
 IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE] MINUS ONE, GO TO A  
 ALL OTHERS, GO TO B

A. Was that more than a year ago – that is, before [NAME CURRENT MONTH] of last year? 0 2† 7 9 [33]

**IF NO, GO TO Q 12**

B. Since that first time, was there ever a time when [he/she] did not [have thoughts that kept coming into [his/her] mind/keep doing things over and over again]? 0 2 7 9 [34]

**IF NO, GO TO Q 12**

C. Did that time when [he/she] didn't [have thoughts that kept coming into [his/her] mind/keep doing things over and over again] last for two months or more? 0 2 7 9 [35]

**IF NO, GO TO Q 12**

D. You said that [he/she] [NAME [ ] SYMPTOMS IN NOTES 1 - 7] in the last year.

How old was [he/she] when this began this time?

CODE AGE (88 = NEVER STARTED AGAIN) -----> | \_\_\_\_ \_\_\_\_ | YRS. [36-37]

IF AGE NOT KNOWN, ASK: What grade was [he/she] in?

CODE GRADE (44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.) -----> | \_\_\_\_ \_\_\_\_ | GRADE [38-39]

15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.) ----->

d: IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE] MINUS ONE, GO TO E  
 ALL OTHERS, GO TO Q 12



E. Did [he/she] start [having thoughts that kept coming into [his/her] mind/doing things over and over] again more than a year ago – that is, before [NAME CURRENT MONTH] of last year? 0 2 7 9 [40]

12. Did [NAME [ ] SYMPTOMS IN NOTES 1 - 7] start suddenly? 0 2 7 9 [41]

**IF YES, A.** Was [he/she] sick with a fever or a sore throat around the time that these things started? 0 2 7 9 [42]

**IF YES, B.** What was wrong with [him/her]?

\_\_\_\_\_ |\_\_\_\_\_| [43-44]  
 \_\_\_\_\_  
 \_\_\_\_\_

13. You said that in the last year [he/she] [NAME [ ] SYMPTOMS IN NOTES 1 - 7].

Now I'd like you to think back to the time in the last year when [his/her] [having these thoughts/doing things like this] caused the most problems.

At that time, did [you (or [his/her] [CARETAKERS])/[his/her] [CARETAKERS]] get annoyed or upset with \_\_\_\_\_ because [he/she] was [having these thoughts/doing things like this]? 0 1 2 7 9 [45]

**IF YES, A.** How often did [you (or [his/her] [CARETAKERS])/[his/her] [CARETAKERS]] get annoyed or upset with [him/her] because of this? Would you say: a lot of the time, some of the time, or hardly ever?

A lot of the time ..... 3 [46]  
 Some of the time ..... 2  
 Hardly ever ..... 1  
 Refuse to answer ..... 7  
 Don't know ..... 9

14. At that time, did [having these thoughts/doing things over and over again] keep \_\_\_\_\_ from doing things or going places with [you (or [his/her] family)/[his/her] family]? 0 1 2 7 9 [47]

**IF YES, A.** How often did this keep [him/her] from doing things or going places with [you (or [his/her] family)/[his/her] family]? Would you say: a lot of the time, some of the time, or hardly ever?

A lot of the time ..... 3 [48]  
 Some of the time ..... 2  
 Hardly ever ..... 1  
 Refuse to answer ..... 7  
 Don't know ..... 9

15. At that time, did [having these thoughts/doing things over and over again] keep [him/her] from doing things or going places with other [children/people [his/her] age]? 0 1 2 7 9 [49]

**IF YES, A.** How often did this keep [him/her] from doing things or going places with other [children/people [his/her] age]? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [50]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

**e: IF CHILD DID NOT ATTEND SCHOOL OR WORK IN LAST YEAR, CODE "8" IN Q 16 AND Q 17, THEN GO TO Q 18**

16. When the problems were worst, did [having these thoughts/doing things over and over again] [make it difficult for [him/her] to do [his/her] schoolwork or cause problems with [his/her] grades/make it difficult for [him/her] to do [his/her] work]? 0 1 2 7 8 9 [51]

**IF YES, A.** How bad were the problems [he/she] had with [his/her] [schoolwork/work] because of this? Would you say: very bad, bad, or not too bad?

- Very bad ..... 3 [52]
- Bad ..... 2
- Not too bad ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

17. At that time, did [having these thoughts/doing things over and over again] cause \_\_\_\_\_'s [teachers/boss] to be annoyed or upset with [him/her]? 0 1 2 7 8 9 [53]

**IF YES, A.** How often [were/was] [his/her] [teachers/boss] annoyed or upset with [him/her] because of this? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [54]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

18. When the problems were worst, did it seem like [having these thoughts/doing things over and over again] made [him/her] feel bad or made [him/her] feel upset? 0 1 2 7 9 [55]

**IF YES, A.** How bad did [having these thoughts/doing things over and over again] seem to make [him/her] feel? Would you say: very bad, bad, or not too bad?

- Very bad ..... 3 [56]
- Bad ..... 2
- Not too bad ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

19. In the last year – that is, since [[NAME EVENT]/[NAME CURRENT MONTH] of last year] – has [he/she] been to see someone at a hospital or a clinic or at their office because [he/she] [had these thoughts/did things over and over again]? 0 2 7 9 [57]

**IF YES, GO TO OPTIONAL DETAILS**

**IF NO,** A. Does [he/she] have an appointment set up to see someone because of this? 0 2 7 9 [58]

**IF YES, GO TO OPTIONAL DETAILS**

**OPTIONAL DETAILS:**

20. Who [did \_\_\_\_\_ see/is \_\_\_\_\_ going to see]? (**WRITE IN:**)

Name: \_\_\_\_\_ |\_\_\_\_\_| [59-60]

Profession: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**A. IF SOMEONE WAS SEEN, ASK:**

What did the person [he/she] saw say was the matter?

\_\_\_\_\_ |\_\_\_\_\_| [61-62]

\_\_\_\_\_

\_\_\_\_\_

**f: IF CHILD IS AGE 7 OR OLDER, CONTINUE**

**ALL OTHERS, GO TO PTSD, P. 77**

**Whole Life Screen**

21. You said that in the last year [he/she] [NAME [ ] SYMPTOMS IN NOTES 1 - 7].

Now I want you to think back to before the last year ... since the time [he/she] turned five years old up until the last twelve months.  
*(INTERVIEWER: point out age five on whole life chart.)*

Since [he/she] turned five years old, was there ever a time when having unpleasant thoughts over and over that [he/she] didn't want to have, or doing things over and over was worse than in the last year? 0 2 7 9 [63]

**IF YES, A.** How old was [he/she] when it was the worst?  
*(INTERVIEWER: IF MORE THAN ONE YEAR IS REPORTED, ASK: "During which single year of age was [he/she] the worst?" IF MORE THAN ONE YEAR STILL REPORTED, ENTER YOUNGEST AGE.)*

**CODE AGE** -----> |\_\_| |\_\_| [64-65]

**IF AGE NOT KNOWN, ASK:** What grade was [he/she] in?  
**CODE GRADE** -----> |\_\_| |\_\_| [66-67]  
 (44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.)