

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA0X13

CMA0X14

CMA0X15

CMA0X16

CMA0X17

CMA0X18

CMA0X19

CMA0X20

CMA0X21

CMA0X22

CMA0O01

CMA0O02

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Incapacity Ratings

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E151

Definitions and questions

**PARENTAL RELATIONSHIPS - PARENT #2**

A child should be able to maintain relationships with his/her parents that are relatively harmonious and capable of containing positive and nurturant communication. The number of arguments or fights that a subject is involved in is rated separately. A change in the relationships, temporally associated with other symptomatology, should ordinarily be expected in order to rate incapacity.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with, or talk to, parent.

**DISCORD:** Incapacity involving aggression, arguments, fights, or disruptive behavior.

**Does it affect how you get along with your "parent"?**

*How?*

*What does "other parent" do about it?*

*What do you do about it?*

*Does it cause any arguments?*

*Can you tell me about the last time it did?*

Coding rules

**PROBLEMS WITH PARENTAL RELATIONSHIP - PARENT #2**

0 = Absent

2 = Present

**WITHDRAWAL**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**DISCORD**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

Codes

CMA1I90  
Intensity

CMA1I01

CMA1I02

CMA1X03

CMA1X04

CMA1X05

CMA1X06

CMA1X07

CMA1X08

CMA1X09

CMA1X10

CMA1X11

CMA1X12

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA1X13

CMA1X14

CMA1X15

CMA1X16

CMA1X17

CMA1X18

CMA1X19

CMA1X20

CMA1X21

CMA1X22

CMA1O01

CMA1O02

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E153

Definitions and questions

**PARENTAL RELATIONSHIPS - OTHER PARENT #1**

A child should be able to maintain relationships with his/her parents that are relatively harmonious and capable of containing positive and nurturant communication. The number of arguments or fights that a subject is involved in is rated separately. A change in the relationships, temporally associated with other symptomatology, should ordinarily be expected in order to rate incapacity.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with, or talk to, parent.

**DISCORD:** Incapacity involving aggression, arguments, fights, or disruptive behavior.

*Does it affect how you get along with "Other Parent #1"?*

Coding rules

**PROBLEMS WITH PARENTAL RELATIONSHIP - OTHER PARENT #1**

0 = Absent

2 = Present

**WITHDRAWAL**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**DISCORD**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

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14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

Codes

CMA2I90 Intensity

CMA2I01

CMA2I02

CMA2X03

CMA2X04

CMA2X05

CMA2X06

CMA2X07

CMA2X08

CMA2X09

CMA2X10

CMA2X11

CMA2X12



Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA2X13

CMA2X14

CMA2X15

CMA2X16

CMA2X17

CMA2X18

CMA2X19

CMA2X20

CMA2X21

CMA2X22

CMA2O01

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CMA2O02

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EISS

Definitions and questions

**PARENTAL RELATIONSHIPS - OTHER PARENT #2**

A child should be able to maintain relationships with his/her parents that are relatively harmonious and capable of containing positive and nurturant communication. The number of arguments or fights that a subject is involved in is rated separately. A change in the relationships, temporally associated with other symptomatology, should ordinarily be expected in order to rate incapacity.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with, or talk to, parent.

**DISCORD:** Incapacity involving aggression, arguments, fights, or disruptive behavior.

**Does it affect how you get along with "Other Parent #2"?**

*How?  
What does "other parent" do about it?  
What do you do about it?  
Does it cause any arguments?  
Can you tell me about the last time it did?*

Coding rules

**PROBLEMS WITH PARENTAL RELATIONSHIP - OTHER PARENT #2**

0 = Absent  
2 = Present

**WITHDRAWAL**

0 = Absent  
2 = Partial Incapacity.  
3 = Severe Incapacity.

**DISCORD**

0 = Absent  
2 = Partial Incapacity.  
3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance  
2 = Separation Anxiety  
3 = Worries/Anxieties  
4 = Obsessions/Compulsions  
5 = Depression  
6 = Mania  
7 = Physical Symptoms  
8 = Food-Related Behavior  
9 = Hyperactivity/ADD  
13 = Conduct  
14 = Psychosis  
15 = Relationships with Parent #1 and/or Parent #2  
16 = Relationships with Other Parent #1 and/or Other Parent #2  
17 = Relationships with Other Adults  
18 = Sibling Relationships  
19 = Peer Relationships  
20 = Life Events/Post-Traumatic Stress

Codes

CMA3190 Intensity

CMA3101

CMA3102

CMA3X03

CMA3X04

CMA3X05

CMA3X06

CMA3X07

CMA3X08

CMA3X09

CMA3X10

CMA3X11

CMA3X12

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA3X13

CMA3X14

CMA3X15

CMA3X16

CMA3X17

CMA3X18

CMA3X19

CMA3X20

CMA3X21

CMA3X22

CMA3O01

CMA3O02

Incapacity Ratings

~~1013~~

E157

Definitions and questions

**SIBLING RELATIONSHIPS: IN HOME**

A child should be able to live in reasonable harmony with a sibling or siblings. Some arguments and fights are to be expected, but harmonious conversations and interactions should predominate. They should not be in constant jealous competition for attention or parental time. A change in relationships, temporally associated with other symptomatology, should ordinarily be expected in order to rate incapacity.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with, or talk to, parent.

**DISCORD:** Incapacity involving aggression, arguments, fights, or disruptive behavior.

*Do you have siblings that live in the home?*

*Does it affect how you get along with your (brothers and sisters)?*

*How?*  
*What do they do about it?*  
*What do you do?*  
*Does it create any arguments?*  
*Can you tell me about the last time it did?*

Coding rules

**PROBLEMS WITH SIBLING RELATIONSHIPS - IN HOME**

0 = Absent  
 2 = Present

**WITHDRAWAL**

0 = Absent  
 2 = Partial Incapacity.  
 3 = Severe Incapacity.

**DISCORD**

0 = Absent  
 2 = Partial Incapacity.  
 3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance  
 2 = Separation Anxiety  
 3 = Worries/Anxieties  
 4 = Obsessions/Compulsions  
 5 = Depression  
 6 = Mania  
 7 = Physical Symptoms  
 8 = Food-Related Behavior  
 9 = Hyperactivity/ADD  
 13 = Conduct  
 14 = Psychosis  
 15 = Relationships with Parent #1 and/or Parent #2  
 16 = Relationships with Other Parent #1 and/or Other Parent #2  
 17 = Relationships with Other Adults  
 18 = Sibling Relationships  
 19 = Peer Relationships  
 20 = Life Events/Post-Traumatic Stress

Codes

CMA4190  
 Intensity

CMA4101

CMA4102

CMA4X03

CMA4X04

CMA4X05

CMA4X06

CMA4X07

CMA4X08

CMA4X09

CMA4X10

CMA4X11

CMA4X12



Definitions and questions

Coding rules

**ONSET OF FIRST PARTIAL INCAPACITY**

**ONSET OF FIRST SEVERE INCAPACITY**

Codes

CMA4X13

CMA4X14

CMA4X15

CMA4X16

CMA4X17

CMA4X18

CMA4X19

CMA4X20

CMA4X21

CMA4X22

CMA4O01

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CMA4O02

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E159

Definitions and questions

Coding rules

Codes

**SIBLING RELATIONSHIPS: OUT OF HOME**

A child should be able to live in reasonable harmony with a sibling or siblings. Some arguments and fights are to be expected, but harmonious conversations and interactions should predominate. They should not be in constant jealous competition for attention or parental time. A change in relationships, temporally associated with other symptomatology, should ordinarily be expected in order to rate incapacity.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with, or talk to, parent.

**DISCORD:** Incapacity involving aggression, arguments, fights, or disruptive behavior

*Do you have siblings outside of the home?*

*Does it affect how you get along with (brothers and/or sisters) who don't live at home?*

*How?*

*What do they do about it?*

*What do you do about it?*

*Does it create any arguments?*

*Can you tell me about the last time?*

**PROBLEMS WITH SIBLING RELATIONSHIP - OUT OF HOME**

0 = Absent

2 = Present

**WITHDRAWAL**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**DISCORD**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

CMA5190  
Intensity

CMA5101

CMA5102

CMA5X03

CMA5X04

CMA5X05

CMA5X06

CMA5X07

CMA5X08

CMA5X09

CMA5X10

CMA5X11

CMA5X12

2/13  
E160

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA5X13

CMA5X14

CMA5X15

CMA5X16

CMA5X17

CMA5X18

CMA5X19

CMA5X20

CMA5X21

CMA5X22

CMA5O01

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CMA5O02

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E161

Definitions and questions

Coding rules

Codes

**SELF CARE**

A child should be able to keep him/herself clean and tidy to a degree consonant with his/her age.

The reduction in level of self-care must be marked enough to have led to visible or smellable changes, or to require unusual parental efforts to maintain appearance.

***What about keeping yourself clean and tidy? Has that been affected at all?***

*How long has it been affected?*

*What is it that makes it hard for you to keep yourself clean and tidy?*

**SELF CARE**

0 = Absent

2 = Partial incapacity.

3 = Severe incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

CMA6I01  
Intensity

CMA6X02

CMA6X03

CMA6X04

CMA6X05

CMA6X06

CMA6X07

CMA6X08

CMA6X09

CMA6X10

CMA6X11

CMA6X12

CMA6X13

CMA6X14

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY  
- SELF CARE

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA6X15

CMA6X16

CMA6X17

CMA6X18

CMA6X19

CMA6X20

CMA6X21

CMA6O01

CMA6O02

Incapacity Ratings

~~11/11~~

E163

Definitions and questions

**CHORES**

A child should be able to perform reasonable work tasks expected of him/her at home, such as keeping the bedroom tidy, helping out around the house and yard. Remember that in most cases a decrement in ability or willingness to perform the tasks is required for an incapacity to be noted.

**What about the jobs you have to do at home?**

*Like chores?*  
**Has it affected you at home at all?**

*In what way?*  
**Are there any things that you can't do properly or that you've stopped doing because of (the way you've been feeling)?**

*Would it make a difference if you didn't.... (have symptoms)?*  
*What difference would it make?*  
*How do you know that it's ..... (symptom)..... that causes the trouble?*

Coding rules

**PROBLEMS WITH COOPERATIVE HELPING**

- 0 = Absent
- 2 = Partial incapacity.
- 3 = Severe incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

CMA7I90  
Intensity

CMA7X02

CMA7X03

CMA7X04

CMA7X05

CMA7X06

CMA7X07

CMA7X08

CMA7X09

CMA7X10

CMA7X11

CMA7X12

CMA7X13

CMA7X14

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA7X15

CMA7X16

CMA7X17

CMA7X18

CMA7X19

CMA7X20

CMA7X21

CMA7O01

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CMA7O02

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Incapacity Ratings

~~3/24~~

E165

Definitions and questions

**HOMEWORK**

A child should be able to do reasonable homework assignments at home. Remember that in most cases a decrement in ability or willingness to perform the tasks is required for an incapacity to be noted.

*What about doing your homework?*

*Has it affected you at all?*

*In what way?*

*Are there any things that you can't do properly or that you've stopped doing because of (the way you've been feeling)?*

*Would it make a difference if you didn't...(have symptoms)?*

*What difference would it make?*

*How do you know that it's...(symptom)...that causes the trouble?*

Coding rules

- HOMEWORK**
- 0 = Absent
  - 2 = Partial incapacity.
  - 3 = Severe incapacity.
- SYMPTOM AREAS CAUSING INCAPACITY**
- 1 = School Non-Attendance
  - 2 = Separation Anxiety
  - 3 = Worries/Anxieties
  - 4 = Obsessions/Compulsions
  - 5 = Depression
  - 6 = Mania
  - 7 = Physical Symptoms
  - 8 = Food-Related Behavior
  - 9 = Hyperactivity/ADD
  - 13 = Conduct
  - 14 = Psychosis
  - 15 = Relationships with Parent #1 and/or Parent #2
  - 16 = Relationships with Other Parent #1 and/or Other Parent #2
  - 17 = Relationships with Other Adults
  - 18 = Sibling Relationships
  - 19 = Peer Relationships
  - 20 = Life Events/Post-Traumatic Stress

Codes

- CMA8I01 Intensity
- CMA8X02
- CMA8X03
- CMA8X04
- CMA8X05
- CMA8X06
- CMA8X07
- CMA8X08
- CMA8X09
- CMA8X10
- CMA8X11
- CMA8X12
- CMA8X13
- CMA8X14



Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA8X15

CMA8X16

CMA8X17

CMA8X18

CMA8X19

CMA8X20

CMA8X21

CMA8O01

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CMA8O02

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Incapacity Ratings

*Handwritten scribble*

E167

Definitions and questions

**LEAVING HOUSE**

A child should be able to leave his/her house without difficulty. Obviously the range of activities that might induce a child to go outside the house varies widely with age, and judgment must be used in deciding what is consonant with the child's developmental stage.

*Does...(symptom)...make it hard for you to leave the house?*

Coding rules

**LEAVING HOUSE**

- 0 = Absent
- 2 = Partial incapacity.
- 3 = Severe incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

CMA9I01  
Intensity

CMA9X02

CMA9X03

CMA9X04

CMA9X05

CMA9X06

CMA9X07

CMA9X08

CMA9X09

CMA9X10

CMA9X11

CMA9X12

CMA9X13

CMA9X14

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMA9X15

CMA9X16

CMA9X17

CMA9X18

CMA9X19

CMA9X20

CMA9X21

CMA9O01

CMA9O02

Incapacity Ratings

~~235~~

E169

Definitions and questions

**SCHOOL LIFE**

**SCHOOL PERFORMANCE**

Deterioration in class work or a decrease in relative performance (as shown by worsening grades) or a notable drop in class position are considered evidence of an incapacity. A description of things that the child used to be able to do but can do no longer is required for a rating here; do not include children whose low intelligence limits their ability to perform school work and who have, therefore, always had poor school results.

*What about at school, does...(symptom)... affect how you get along there?*

*Or affect how well you can do your lessons?*

*How?*

*Can you tell me about the last time that it did?*

Coding rules

**DAYCARE/SCHOOL PERFORMANCE**

- 0 = Absent
- 2 = Partial incapacity.
- 3 = Severe incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

CMB0190  
Intensity

CMB0X02

CMB0X03

CMB0X04

CMB0X05

CMB0X06

CMB0X07

CMB0X08

CMB0X09

CMB0X10

CMB0X11

CMB0X12

CMB0X13

CMB0X14

P013

200

Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMB0X15

CMB0X16

CMB0X17

CMB0X18

CMB0X19

CMB0X20

CMB0X21

CMB0001

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CMB0002

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E171

Definitions and questions

**SCHOOL SUSPENSION**  
 Exclusion from school for any length of time.  
*Have you ever been suspended from daycare/school?*  
*Has it happened in the last three months?*

Coding rules

**SUSPENSION**

- 0 = Absent
- 2 = Present

**SUSPENSION IN LAST 3 MONTHS**

- 0 = Absent
- 2 = Present

**DURATION OF LONGEST SUSPENSION IN LAST 3 MONTHS (IN DAYS)**

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

Ever:CMB1E90  
Intensity

Ever:CMB1V01  
Frequency

Ever:CMB1O01  
Onset  
 / /

CMB1I01  
Intensity

CMB1D01

Ever:CMB1X02

Ever:CMB1X03

Ever:CMB1X04

Ever:CMB1X05

Ever:CMB1X06

Ever:CMB1X07

Ever:CMB1X08

Ever:CMB1X09

Ever:CMB1X10

E172

1713

Definitions and questions

Coding rules

Codes

Ever:CMB1X11

Ever:CMB1X12

Ever:CMB1X13

Ever:CMB1X14

Ever:CMB1X15

Ever:CMB1X16

Ever:CMB1X17

Ever:CMB1X18

Ever:CMB1X19

Ever:CMB1X20

Ever:CMB1X21

Incapacity Ratings

~~3/17/13~~

E173

Definitions and questions

<p><b>IN-SCHOOL SUSPENSION</b></p> <p>Exclusion from school for any length of time.</p> <p><b><i>Have you ever been suspended in school?</i></b></p> <p><i>Has it happened in the last three months?</i></p>	
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Coding rules

<p><b>IN-SUSPENSION</b></p> <p>0 = Absent</p> <p>2 = Present</p> <p><b>SUSPENSION IN LAST 3 MONTHS</b></p> <p>0 = Absent</p> <p>2 = Present</p> <p><b>DURATION OF LONGEST SUSPENSION IN LAST 3 MONTHS (IN DAYS)</b></p> <p><b>SYMPTOM AREAS CAUSING INCAPACITY</b></p> <p>1 = School Non-Attendance</p> <p>2 = Separation Anxiety</p> <p>3 = Worries/Anxieties</p> <p>4 = Obsessions/Compulsions</p> <p>5 = Depression</p> <p>6 = Mania</p> <p>7 = Physical Symptoms</p> <p>8 = Food-Related Behavior</p> <p>9 = Hyperactivity/ADD</p> <p>13 = Conduct</p> <p>14 = Psychosis</p> <p>15 = Relationships with Parent #1 and/or Parent #2</p> <p>16 = Relationships with Other Parent #1 and/or Other Parent #2</p> <p>17 = Relationships with Other Adults</p> <p>18 = Sibling Relationships</p> <p>19 = Peer Relationships</p> <p>20 = Life Events/Post-Traumatic Stress</p>	
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Codes

<p>Ever:CMB2E90 Intensity</p> <p><input type="text"/></p> <p>Ever:CMB2V01 Frequency</p> <p><input type="text"/></p> <p>Ever:CMB2O01 Onset</p> <p><input type="text" value="/ /"/></p> <p>CMB2I01 Intensity</p> <p><input type="text"/></p> <p>CMB2D01</p> <p><input type="text"/></p> <p>CMB2X02</p> <p><input type="text"/></p> <p>CMB2X03</p> <p><input type="text"/></p> <p>CMB2X04</p> <p><input type="text"/></p> <p>CMB2X05</p> <p><input type="text"/></p> <p>CMB2X06</p> <p><input type="text"/></p> <p>CMB2X07</p> <p><input type="text"/></p> <p>CMB2X08</p> <p><input type="text"/></p> <p>CMB2X09</p> <p><input type="text"/></p> <p>CMB2X10</p> <p><input type="text"/></p>	
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E174

E174



Definitions and questions

Coding rules

Codes

CMB2X11

CMB2X12

CMB2X13

CMB2X14

CMB2X15

CMB2X16

CMB2X17

CMB2X18

CMB2X19

CMB2X20

CMB2X21

Incapacity Ratings

~~2/2/2~~

E175

Definitions and questions

Coding rules

Codes

**SCHOOL EXPULSION**

Expulsion from daycare/school or asked to withdraw voluntarily.

*Have you ever been expelled from school?*

*Has that happened in the last three months?*

**EXPULSION**

- 0 = Absent
- 2 = Present

**DATE OF FIRST EXPULSION**

**EXPULSION IN LAST 3 MONTHS**

- 0 = Absent
- 2 = Present

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Ever:CMB3E90 Intensity

Ever:CMB3V01 Frequency

Ever:CMB3O01

CMB3I01 Intensity

CMB3X02

CMB3X03

CMB3X04

CMB3X05

CMB3X06

CMB3X07

CMB3X08

CMB3X09

CMB3X10

CMB3X11

PAID

Definitions and questions

Coding rules

Codes

CMB3X12

CMB3X13

CMB3X14

CMB3X15

CMB3X16

CMB3X17

CMB3X18

CMB3X19

CMB3X20

CMB3X21

Incapacity Ratings

~~2/12~~

E177

Definitions and questions

Coding rules

Codes

**TEACHER RELATIONSHIPS**

A deterioration in a child's relationships with his/her teachers is regarded as an incapacity. The need to use increasing levels of disciplinary action, or a withdrawal from contact with teachers with whom the child has previously had good relationships, is evidence of disturbance here.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with or talk to teachers.

**DISCORD:** Incapacity involving aggression, arguments, fights or disruptive behavior.

*Does it affect how you get along with the teachers?*

*How?*

*Can you tell me about the last time that it did?*

**PROBLEMS WITH DAYCARE PROVIDER/TEACHER RELATIONSHIPS**

0 = Absent

2 = Present

**WITHDRAWAL**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**DISCORD**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

CMB4I90  
Intensity

CMB4I01

CMB4I02

CMB4X03

CMB4X04

CMB4X05

CMB4X06

CMB4X07

CMB4X08

CMB4X09

CMB4X10

CMB4X11

CMB4X12

Definitions and questions

Coding rules

Codes

[Empty box for definitions and questions]

CMB4X13

[Empty box]

CMB4X14

[Empty box]

CMB4X15

[Empty box]

CMB4X16

[Empty box]

CMB4X17

[Empty box]

CMB4X18

[Empty box]

CMB4X19

[Empty box]

CMB4X20

[Empty box]

CMB4X21

[Empty box]

CMB4X22

[Empty box]

ONSET OF FIRST PARTIAL INCAPACITY

CMB4O01

//

ONSET OF FIRST SEVERE INCAPACITY

CMB4O02

//

Incapacity Ratings

~~6000~~

E 179



Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMB5X13

CMB5X14

CMB5X15

CMB5X16

CMB5X17

CMB5X18

CMB5X19

CMB5X20

CMB5X21

CMB5X22

CMB5O01

/ /

CMB5O02

/ /

~~201~~

E 181

Definitions and questions

**SPARE TIME ACTIVITIES**

Normal out of school activities should be reduced by at least one third and to a degree outside their normal range of variation. Care should be taken to ensure that the subject has not lost interest in an activity for no particular reason. That is to say that the reduction in involvement must clearly be a response to some symptomatology.

Play here includes many activities: imaginary play; playing with dolls, cars, trains; outdoor play; playing on computer/gameboy/nintendo, etc.

***Does it affect what you do in your spare time?***

*For example, has this made it difficult to (refer to subjects' interests/hobbies/leisure activities)?*

Coding rules

- SPARE TIME ACTIVITIES**
- 0 = Absent
  - 2 = Partial incapacity.
  - 3 = Severe incapacity.
- SYMPTOM AREAS CAUSING INCAPACITY**
- 1 = School Non-Attendance
  - 2 = Separation Anxiety
  - 3 = Worries/Anxieties
  - 4 = Obsessions/Compulsions
  - 5 = Depression
  - 6 = Mania
  - 7 = Physical Symptoms
  - 8 = Food-Related Behavior
  - 9 = Hyperactivity/ADD
  - 13 = Conduct
  - 14 = Psychosis
  - 15 = Relationships with Parent #1 and/or Parent #2
  - 16 = Relationships with Other Parent #1 and/or Other Parent #2
  - 17 = Relationships with Other Adults
  - 18 = Sibling Relationships
  - 19 = Peer Relationships
  - 20 = Life Events/Post-Traumatic Stress

Codes

- CMB6I01 Intensity
- CMB6X02
- CMB6X03
- CMB6X04
- CMB6X05
- CMB6X06
- CMB6X07
- CMB6X08
- CMB6X09
- CMB6X10
- CMB6X11
- CMB6X12
- CMB6X13
- CMB6X14



Definitions and questions

Coding rules

ONSET OF FIRST PARTIAL INCAPACITY

ONSET OF FIRST SEVERE INCAPACITY

Codes

CMB6X15

CMB6X16

CMB6X17

CMB6X18

CMB6X19

CMB6X20

CMB6X21

CMB6O01

//

CMB6O02

//

~~2/14~~

Definitions and questions

**RELATIONSHIPS WITH ADULTS IN SPARE TIME ACTIVITIES**

Both withdrawal from such relationships and disturbances of their harmony are evidence to be borne on mind for the purposes of a rating here.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with or talk to adults.

**DISCORD:** Incapacity involving aggression, arguments, fights or disruptive behavior.

*Does it affect how you get along with other people outside the home or school - such as neighbors...or people at (youth club, etc.)?*

*Who?*

*How?*

*Can you tell me about the last time that it did?*

*Has it made you see less of other adults?*

*Or try to avoid them?*

*Or do they treat you differently?*

*Why?*

Coding rules

**PROBLEMS WITH RELATIONSHIPS WITH ADULTS OUTSIDE THE HOME OR DAYCARE/SCHOOL**

0 = Absent

2 = Present

**WITHDRAWAL**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**DISCORD**

0 = Absent

2 = Partial Incapacity.

3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

Codes

CMB7I90  
Intensity

CMB7I01

CMB7I02

CMB7X03

CMB7X04

CMB7X05

CMB7X06

CMB7X07

CMB7X08

CMB7X09

CMB7X10

CMB7X11

Definitions and questions

Coding rules

Codes

[Empty box for definitions and questions]

CMB7X12

CMB7X13

CMB7X14

CMB7X15

CMB7X16

CMB7X17

CMB7X18

CMB7X19

CMB7X20

CMB7X21

CMB7X22

ONSET OF FIRST PARTIAL INCAPACITY

CMB7O01

 / /

ONSET OF FIRST SEVERE INCAPACITY

CMB7O02

 / /

~~scribble~~

E185

Definitions and questions

**RELATIONSHIPS WITH PEERS**

Children should be able to form mutually interested relationships and to undertake activities together (hanging out constitute activities in this setting). The loss of friends or withdrawal from peer activities indicates incapacity in this area.

**WITHDRAWAL:** Incapacity involving refusal or inability to be involved with or talk to peers.

**DISCORD:** Incapacity involving aggression, arguments, fights or disruptive behavior.

**Has it affected how you get along with friends at all - I mean outside school?**

*How?*  
*Can you tell me more about the last time that it did?*  
*Has it made you see less of friend(s) than you used to?*  
*Why is that?*  
**What about with other children/young people in your neighborhood?**

Coding rules

**PROBLEMS WITH PEER RELATIONSHIPS**

- 0 = Absent
- 2 = Present

**WITHDRAWAL**

- 0 = Absent
- 2 = Partial Incapacity.
- 3 = Severe Incapacity.

**DISCORD**

- 0 = Absent
- 2 = Partial Incapacity.
- 3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

CMB8190  
Intensity

CMB8101

CMB8102

CMB8X03

CMB8X04

CMB8X05

CMB8X06

CMB8X07

CMB8X08

CMB8X09

CMB8X10

CMB8X11

CMB8X12

E186

2813

Definitions and questions

Coding rules

Codes

[Empty box for definitions and questions]

CMB8X13

[Empty box]

CMB8X14

[Empty box]

CMB8X15

[Empty box]

CMB8X16

[Empty box]

CMB8X17

[Empty box]

CMB8X18

[Empty box]

CMB8X19

[Empty box]

CMB8X20

[Empty box]

CMB8X21

[Empty box]

CMB8X22

[Empty box]

ONSET OF FIRST PARTIAL INCAPACITY

CMB8O01

/ /

ONSET OF FIRST SEVERE INCAPACITY

CMB8O02

/ /

Incapacity Ratings

~~187~~

E187

Definitions and questions

Coding rules

Codes

**EMPLOYMENT**

Many adolescents have jobs, and they may prove unable to perform these jobs adequately as a result of psychopathology, in which case an incapacity should be recorded as being present as a result of that psychopathology. Their performance of the job must actually be substandard to some degree. It is not enough that the subject should simply describe it as being more difficult or tiring.

**Do you have a job?**

*Has that been affected at all?*

**EMPLOYMENT**

- 0 = Absent
- 2 = Present

**WITHDRAWAL**

- 0 = Absent
- 2 = Partial Incapacity.
- 3 = Severe Incapacity.

**DISCORD**

- 0 = Absent
- 2 = Partial Incapacity.
- 3 = Severe Incapacity.

**SYMPTOM AREAS CAUSING INCAPACITY**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

CMB9190  
Intensity

CMB9101

CMB9102

CMB9X03

CMB9X04

CMB9X05

CMB9X06

CMB9X07

CMB9X08

CMB9X09

CMB9X10

CMB9X11

CMB9X12

E18 8

Definitions and questions

Coding rules

**ONSET OF FIRST PARTIAL INCAPACITY  
- EMPLOYMENT**

**ONSET OF FIRST SEVERE INCAPACITY  
- EMPLOYMENT**

Codes

CMB9X13

CMB9X14

CMB9X15

CMB9X16

CMB9X17

CMB9X18

CMB9X19

CMB9X20

CMB9X21

CMB9X22

CMB9O01

//

CMB9O02

//

Definitions and questions

**MEDICATION**

Any medication prescribed by a medical practitioner (either mainstream or alternative) or given by parents or guardian. Do not include analgesics taken less than once per week for sporadic headaches, etc. However, such drugs should be included if they are taken more regularly than this.

Note: Type and daily dose if known for any medication mentioned.

*Are you on any medication?*

*Or tablets?*

*Or anything from your doctor?*

*What?*

*What is that?*

Coding rules

**MEDICATION**

0 = Absent

2 = Present

**MINOR TRANQUILIZERS/SEDATIVES**

0 = Absent

2 = Present

**BEGINNING OF MINOR TRANQUILIZERS/SEDATIVES TREATMENT**

**ANTI-PSYCHOTICS/MAJOR TRANQUILIZERS**

0 = Absent

2 = Present

**BEGINNING OF ANTI-PSYCHOTICS/MAJOR TRANQUILIZERS TREATMENT**

**STIMULANTS**

0 = Absent

2 = Present

**BEGINNING OF STIMULANTS TREATMENT**

**STRATTERA (NON-STIMULANT)**

0 = Absent

2 = Present

**BEGINNING OF STRATTERA (NON-STIMULANT) TREATMENT**

**ANTIDEPRESSANTS**

0 = Absent

2 = Present

**BEGINNING OF ANTIDEPRESSANTS TREATMENT**

**LITHIUM**

0 = Absent

2 = Present

Codes

CMC0190  
Intensity

CMC0101

CMC0001

CMC1101

CMC1001

CMC2101

CMC2001

CMC2102

CMC2002

CMC3101

CMC3001

CMC4101

0913



Definitions and questions

IF ANY MEDICATION TAKEN CONTINUE. OTHERWISE, SKIP TO "OFFSETS", (PAGE 56).

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Coding rules

BEGINNING OF LITHIUM TREATMENT

ANTICONVULSANTS

0 = Absent

2 = Present

BEGINNING OF ANTICONVULSANTS TREATMENT

ANTIBIOTICS

0 = Absent

2 = Present

BEGINNING OF ANTIBIOTICS TREATMENT

ASTHMA MEDICATION

0 = Absent

2 = Present

BEGINNING OF ASTHMA MEDICATION TREATMENT

OTHER

0 = Absent

2 = Present

Specify

BEGINNING OF TREATMENT

Codes

CMC4001

//

CMC5101

CMC5001

//

CMF0101

CMF0001

//

CMF1101

CMF1001

//

CMC6101

CMC6001

//

~~222~~

E191

Definitions and questions

**MEDICATION - RX 1**

*Which medication are you on?*

*How many milligrams do you take?*

NUMBER OF DOSES AT THIS NUMBER OF MG. IN 24 HOURS.

IF DOSE VARIES WITHIN 24 HOURS, ASK:

DATE MEDICATION STARTED.

*Did the doctor explain what problem(s) and/or symptom(s) this medication was supposed to help?*

*What did the doctor say? (Record verbatim)*

*Did the Doctor mention any side effects that you need to watch out for?*

IF YES ASK:

*What are they?*

RECORD NUMBER OF SIDE EFFECTS MENTIONED BY PARENT.

*Have you experienced any side effects from this medicine?*

*How often do you return to the doctor's office to have the child's reaction to the medication checked?*

INTERVIEWER: I LOOKED AT THE MEDICATION BOTTLE.

Coding rules

**DETAILED MEDICATION LIST**

0 = No Medication

1 = Abilify

2 = Accutane

3 = Anafranil (clompramine)

4 = Atarax

5 = Benadryl

6 = Benezedrine

7 = Celexa

8 = Concerta

9 = Cylert

10 = Daytrana

11 = Dexedrine

12 = Effexor

13 = Elivil

14 = Focalin

15 = Gabapentin

16 = Geodon

17 = Lamictal

18 = Lexapro

19 = Lithium

20 = Marplan

21 = Metadate

22 = Norpramin

23 = Paxil

24 = Prednisone

25 = Prozac

26 = Ritalin

27 = Seroquel

28 = Tegretol

29 = Tenex

30 = Tofranil

31 = Topamax

32 = Trileptal

33 = Uniphyl

34 = Valproate

Codes

COAAX03  
Intensity

Definitions and questions

Coding rules

- 35 = Wellbutrin
- 36 = Zoloft
- 37 = Zyrtek
- 38 = Other Medication.

**DOSE IN MG - RX 1**

Codes

COAAX01

COAAF01  
Frequency

**DOSE IN MG - (IF VARIES WITHIN 24 HOURS) - RX 2**

COAAX02

**NUMBER OF DOSES AT THIS NUMBER OF MG IN 24 HOURS ( IF VARIES WITHIN 24 HOURS) - RX 2**

COAAF02

COAAO01  
Onset

**DOCTOR EXPLANATION**

- 0 = No
- 2 = Yes

COAAX05

**MENTION OF SIDE EFFECTS**

- 0 = No
- 2 = Yes

COAAX07

**NUMBER OF SIDE EFFECTS - RX 1**

COAAX08

**CHECKING REACTION TO MEDICATION**

- 0 = No
- 2 = Yes

COAAX09

**VIEWED MEDICATION BOTTLE**

- 0 = No
- 2 = Yes

COAAX10

Definitions and questions

Coding rules

Codes

**MEDICATION - RX 2**

WHICH MEDICATION ARE YOU ON?

*How many milligrams do you take?*

NUMBER OF DOSES AT THIS NUMBER OF MG. IN 24 HOURS.

IF DOSE VARIES WITHIN 24 HOURS, ASK:

DATE MEDICATION STARTED.

***Did the doctor explain what problem(s) and/or symptom(s) this medication was supposed to help?***

*What did the doctor say? (Record verbatim)*

***Did the Doctor mention any side effects that you need to watch out for?***

IF YES ASK:

*What are they?*

RECORD NUMBER OF SIDE EFFECTS MENTIONED BY PARENT.

***Have you experienced any side effects from this medicine?***

*How often do you return to the doctor's office to have the child's reaction to the medication checked?*

INTERVIEWER: I LOOKED AT THE MEDICATION BOTTLE.

**DETAILED MEDICATION LIST**

- 0 = No Medication
- 1 = Abilify
- 2 = Accutane
- 3 = Anafranil (clompramine)
- 4 = Atarax
- 5 = Benadryl
- 6 = Benezedrine
- 7 = Celexa
- 8 = Concerta
- 9 = Cylert
- 10 = Daytrana
- 11 = Dexedrine
- 12 = Effexor
- 13 = Elivil
- 14 = Focalin
- 15 = Gabapentin
- 16 = Geodon
- 17 = Lamictal
- 18 = Lexapro
- 19 = Lithium
- 20 = Marplan
- 21 = Metadate
- 22 = Norpramin
- 23 = Paxil
- 24 = Prednisone
- 25 = Prozac
- 26 = Ritalin
- 27 = Seroquel
- 28 = Tegretol
- 29 = Tenex
- 30 = Tofranil
- 31 = Topamax
- 32 = Trileptal
- 33 = Uniphyl
- 34 = Valproate

COABX03  
Intensity



Definitions and questions

Coding rules

35 = Wellbutrin

36 = Zoloft

37 = Zyrtek

38 = Other Medication.

**DOSE IN MG - RX 2**

**DOSE IN MG (IF VARIES WITHIN 24 HOURS) - RX 2**

**NUMBER OF DOSES AT THIS NUMBER OF MG IN 24 HOURS ( IF VARIES WITHIN 24 HOURS) - RX 2**

**DOCTOR EXPLANATION**

0 = No

2 = Yes

**MENTION OF SIDE EFFECTS**

0 = No

2 = Yes

**NUMBER OF SIDE EFFECTS - RX 2**

**CHECKING REACTION TO MEDICATION**

0 = No

2 = Yes

**VIEWED MEDICATION BOTTLE**

0 = No

2 = Yes

Codes

COABX01

COABF01  
Frequency

COABX02

COABF02

COABO01  
Onset

COABX05

COABX07

COABX08

COABX09

COABX10

~~27/28~~ E195

Definitions and questions

Coding rules

Codes

**MEDICATION - RX 3**

WHICH MEDICATION ARE YOU ON?

*How many milligrams do you take?*

NUMBER OF DOSES AT THIS NUMBER OF MG. IN 24 HOURS.

IF DOSE VARIES WITHIN 24 HOURS, ASK:

DATE MEDICATION STARTED.

***Did the doctor explain what problem(s) and/or symptom(s) this medication was supposed to help?***

*What did the doctor say? (Record verbatim)*

***Did the Doctor mention any side effects that you need to watch out for?***

IF YES ASK:

*What are they?*

RECORD NUMBER OF SIDE EFFECTS MENTIONED BY PARENT.

***Have you experienced any side effects from this medicine?***

*How often do you return to the doctor's office to have the child's reaction to the medication checked?*

INTERVIEWER: I LOOKED AT THE MEDICATION BOTTLE.

**DETAILED MEDICATION LIST**

0 = No Medication

1 = Abilify

2 = Accutane

3 = Anafranil (clompramine)

4 = Atarax

5 = Benadryl

6 = Benezedrine

7 = Celexa

8 = Concerta

9 = Cylert

10 = Daytrana

11 = Dexedrine

12 = Effexor

13 = Elivil

14 = Focalin

15 = Gabapentin

16 = Geodon

17 = Lamictal

18 = Lexapro

19 = Lithium

20 = Marplan

21 = Metadate

22 = Norpramin

23 = Paxil

24 = Prednisone

25 = Prozac

26 = Ritalin

27 = Seroquel

28 = Tegretol

29 = Tenex

30 = Tofranil

31 = Topamax

32 = Trileptal

33 = Uniphyl

34 = Valproate

COACX03  
Intensity



Definitions and questions

Coding rules

- 35 = Wellbutrin
- 36 = Zoloft
- 37 = Zyrtek
- 38 = Other Medication.

**DOSE IN MG - RX 3**

**DOSE IN MG (IF VARIES WITHIN 24 HOURS) - RX 3**

**NUMBER OF DOSES AT THIS NUMBER OF MG IN 24 HOURS ( IF VARIES WITHIN 24 HOURS) - RX 3**

**DOCTOR EXPLANATION**

- 0 = No
- 2 = Yes

**MENTION OF SIDE EFFECTS**

- 0 = No
- 2 = Yes

**NUMBER OF SIDE EFFECTS - RX 3**

**CHECKING REACTION TO MEDICATION**

- 0 = No
- 2 = Yes

**VIEWED MEDICATION BOTTLE**

- 0 = No
- 2 = Yes

Codes

COACX01

COACF01  
Frequency

COACX02

COACF02

COACO01  
Onset

COACX05

COACX07

COACX08

COACX09

COACX10

*Handwritten initials*

E197

Definitions and questions

**MEDICATION - RX 4**

*How many milligrams do you take?*

NUMBER OF DOSES AT THIS NUMBER OF MG. IN 24 HOURS.

IF DOSE VARIES WITHIN 24 HOURS, ASK:

DATE MEDICATION STARTED.

**Did the doctor explain what problem(s) and/or symptom(s) this medication was supposed to help?**

*What did the doctor say? (Record verbatim)*

**Did the Doctor mention any side effects that you need to watch out for?**

IF YES ASK:

*What are they?*

RECORD NUMBER OF SIDE EFFECTS MENTIONED BY PARENT.

**Have you experienced any side effects from this medicine?**

*How often do you return to the doctor's office to have the child's reaction to the medication checked?*

INTERVIEWER: I LOOKED AT THE MEDICATION BOTTLE.

Coding rules

**DETAILED MEDICATION LIST**

- 0 = No Medication
- 1 = Abilify
- 2 = Accutane
- 3 = Anafranil (clompramine)
- 4 = Atarax
- 5 = Benadryl
- 6 = Benezedrine
- 7 = Celexa
- 8 = Concerta
- 9 = Cylert
- 10 = Daytrana
- 11 = Dexedrine
- 12 = Effexor
- 13 = Elivil
- 14 = Focalin
- 15 = Gabapentin
- 16 = Geodon
- 17 = Lamictal
- 18 = Lexapro
- 19 = Lithium
- 20 = Marplan
- 21 = Metadate
- 22 = Norpramin
- 23 = Paxil
- 24 = Prednisone
- 25 = Prozac
- 26 = Ritalin
- 27 = Seroquel
- 28 = Tegretol
- 29 = Tenex
- 30 = Tofranil
- 31 = Topamax
- 32 = Trileptal
- 33 = Uniphyl
- 34 = Valproate

Codes

COADX03  
Intensity

0 E198

FPI3

198



Definitions and questions

Coding rules

- 35 = Wellbutrin
- 36 = Zoloft
- 37 = Zyrtek
- 38 = Other Medication.

**DOSE IN MG - RX 4**

**DOSE IN MG (IF VARIES WITHIN 24 HOURS) - RX 4**

**NUMBER OF DOSES AT THIS NUMBER OF MG IN 24 HOURS ( IF VARIES WITHIN 24 HOURS) - RX 4**

**DOCTOR EXPLANATION**

- 0 = No
- 2 = Yes

**MENTION OF SIDE EFFECTS**

- 0 = No
- 2 = Yes

**NUMBER OF SIDE EFFECTS - RX 4**

**CHECKING REACTION TO MEDICATION**

- 0 = No
- 2 = Yes

**VIEWED MEDICATION BOTTLE**

- 0 = No
- 2 = Yes

Codes

COADX01

COADF01  
Frequency

COADX02

COADF02

COADO01  
Onset

COADX05

COADX07

COADX08

COADX09

COADX10

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~~22/3/3~~

E199

Definitions and questions

Coding rules

Codes

**OFFSETS**

Code here if symptoms coded in the symptom section have ceased within the 3 months primary period.

**CODE HERE IF SYMPTOMS CODED IN THE SYMPTOM SECTION HAVE CEASED WITHIN THE 3 MONTHS PRIMARY PERIOD.**

**PRESENT 2**

0 = Absent

2 = Present

**SCHOOL NON-ATTENDANCE**

**SEPARATION ANXIETY**

**WORRIES/ANXIETY**

**OBSESSIONS/COMPULSIONS**

**DEPRESSION**

**MANIA**

**PHYSICAL SYMPTOMS**

**FOOD-RELATED BEHAVIOR**

**HYPERACTIVITY**

**CONDUCT DISORDER**

**ALCOHOL/DRUGS**

**SMOKING CIGARETTES**

**PSYCHOSIS**

CMC7XYZ 00  
Intensity

CMC7001

CMC7002

CMC7003

CMC7004

CMC7005

CMC7006

CMC7007

CMC7008

CMC7019

CMC7009

CMC7010

CMC7018

CMC7011

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Definitions and questions

**PLACEMENT**

If, by reason of psychological or behavioral disturbance, a child's residential placement is changed then that change is recorded in this section. The same guiding rules apply to these ratings as are outlined above.

WITH CHILDREN WHO HAVE EXPERIENCED CHANGES ASK:

*Why did you move...("into foster care", etc.)?*

*Was it because of...(symptoms)...at all?*

Coding rules

RELATIONSHIPS WITH PARENT #1 AND/OR PARENT #2

RELATIONSHIPS WITH OTHER PARENT #1 AND/OR OTHER PARENT #2

RELATIONSHIPS WITH OTHER ADULTS

SIBLING RELATIONSHIPS

PEER RELATIONSHIPS

LIFE EVENTS/POST-TRAUMATIC STRESS

PLACEMENT

- 0 = Absent
- 2 = Present

SYMPTOM AREAS LEADING TO TREATMENT

- 0 = Absent
- 2 = School Non-Attendance
- 3 = Separation Anxiety
- 4 = Worries/Anxiety
- 5 = Depression
- 6 = Food Related Behavior
- 7 = Conduct Disorder
- 8 = Relationships with P1 and/or P2
- 9 = Relationships with OP1 and/or OP2
- 10 = Relationships with Other Adults
- 11 = Sibling Relationships
- 12 = Peer Relationships

Codes

CMC7012

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CMC7013

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CMC7014

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CMC7015

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CMC7016

//

CMC7017

//

CMD1101 Intensity

CMC1X02

CMD1001 Onset

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~~201~~

E201

Definitions and questions

**ENDING THE INTERVIEW**

**PERCEPTION OF PROBLEMS**

*We have covered quite a lot of ground, but is there anything that worries you, or causes problems, that I haven't asked about?*

*What?*  
*Can you tell me more about that?*  
*You have told me about many different things; do you think that any of them are problems for you?*

Coding rules

**PERCEPTION OF PROBLEM(S)**

0 = Absent

2 = Present

**PROBLEMS WITH:**

1 = School Non-Attendance

2 = Separation Anxiety

3 = Worries/Anxieties

4 = Obsessions/Compulsions

5 = Depression

6 = Mania

7 = Physical Symptoms

8 = Food-Related Behavior

9 = Hyperactivity/ADD

13 = Conduct

14 = Psychosis

15 = Relationships with Parent #1 and/or Parent #2

16 = Relationships with Other Parent #1 and/or Other Parent #2

17 = Relationships with Other Adults

18 = Sibling Relationships

19 = Peer Relationships

20 = Life Events/Post-Traumatic Stress

Codes

CMC8I90  
Intensity

CMC8X01

CMC8X02

CMC8X03

CMC8X04

CMC8X05

CMC8X06

Definitions and questions

**HELP NEEDED WITH:**  
*Are there any things that you think you need help with?*

*What?*  
*What sort of help do you need?*

Coding rules

**HELP NEEDED**

- 0 = Absent
- 2 = Present

**HELP NEEDED WITH:**

- 1 = School Non-Attendance
- 2 = Separation Anxiety
- 3 = Worries/Anxieties
- 4 = Obsessions/Compulsions
- 5 = Depression
- 6 = Mania
- 7 = Physical Symptoms
- 8 = Food-Related Behavior
- 9 = Hyperactivity/ADD
- 13 = Conduct
- 14 = Psychosis
- 15 = Relationships with Parent #1 and/or Parent #2
- 16 = Relationships with Other Parent #1 and/or Other Parent #2
- 17 = Relationships with Other Adults
- 18 = Sibling Relationships
- 19 = Peer Relationships
- 20 = Life Events/Post-Traumatic Stress

Codes

CMC9I90  
Intensity

CMC9X01

CMC9X02

CMC9X03

CMC9X04

CMC9X05

CMC9X06

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