Definitions and questions	Coding rules	Codes

DIFFICULTY MAKING OR KEEPING FRIENDS

Child has difficulty either forming or maintaining friendships, which is evidenced by having no or few friends. The difficulty may be due to failure to approach other children (withdrawal) or aggressive relationships with other children (discord) or both.

Do not include worry or anxiety about friendships unless it leads to difficulty in making or keeping friendships.

Does X have any difficulty making friends with other children?

Does s/he have any trouble keeping friends?

Does s/he find other children don't want to play with him/her or don't choose him/her for games?

Does s/he often say that other children do not like him/her? What happens?
Do you think s/he's more shy than other boys/girls the same age?
Does that affect his/her making/keeping friends?
Or does s/he get into arguments or fights with friends or other children who might become friends?
How does she feel about that?
Does it bother him/her?
How long has s/he had difficulty making/keeping friends? Has it always been like that, or can you remember when it started?

DIFFICULTY MAKING FRIENDS

0 = Absent

2 = Present

WITHDRAWAL

2 = Definite difficulty in making or keeping friends, but has managed to maintain friendship for at least 3 months since onset.

3 = As above, but has had no friendship lasting as long as 3 months since onset.

DISCORD

2 = Definite difficulty in making or keeping friends, but has managed to maintain friendship for at least 3 months since onset.

3 = As above, but has had no friendship lasting as long as 3 months since onset.

REASONS (CODE DOMINANT REASON)

1 = Shyness

2 = Physical aggression.

3 = Verbal aggression.

4 = Lack of interest.

5 = Other

Specify

PAM0I03
Intensity

PAM0I01

PAM0I02

PAM0O01
Onset

/   /

PAM0X01

IF NO DIFFICULTY MAKING OR KEEPING FRIENDS DUE TO DISCORD, THEN COMPLETE CONFLICTUAL RELATIONSHIPS WITH FRIENDS. OTHERWISE, SKIP TO "CHILD IS TEASED/BULLIED", (PAGE 12).

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| Definitions and questions | Coding rules | Codes |

CONFLICTUAL RELATIONSHIP WITH FRIENDS

The child has relationships with a friend or friends that include substantial amounts of physical or verbal aggression or arguments. Conflict may or may not cause the child problems in making or keeping friends.

THIS ITEM IS GENERALLY CODABLE BASED ON INFORMATION ALREADY GIVEN.

YOU HAVE TOLD ME THAT X DOESN'T HAVE DIFFICULTY MAKING OR KEEPING FRIENDS.

Does X have a lot of conflict with his/her friends?

Does it cause him/her difficulty in making or keeping friends?

CONFLICTS INTERFERE WITH CHILD'S ABILITY TO MAKE OR KEEP FRIENDS

0 = Absent

2 = Present with at least one friend.

3 = Most or all friendships characterized by conflictual relationships.

PAM2I01 Intensity

CONFLICTS INTERFERE WITH CHILD'S ABILITY TO MAKE OR KEEP FRIENDS

0 = Absent

2 = Present

PAM2I02

CHILD IS TEASED/BULLIED

Child is a particular object of mockery, physical attacks or threats by peers or siblings.

Does X get teased or bullied at all by his/her siblings or friends?

Is that more than other children?
Does s/he feel somewhat singled out?
Are other boys and girls mean to him/her?

How much?
Tell me about the last time.
Who does it?
Why do they do it?
Why do they pick on X?
What does s/he do about it?
What do you do about it?

CHILD TEASED OR BULLIED

0 = Absent

2 = The child is a particular and preferred object for bullying or teasing. S/he is at least somewhat singled out for this sort of attention.

PAM4I01 Intensity

HOME

PAM4F01 Home Frequency

DAYCARE/SCHOOL

PAM4F02 Daycare/School Frequency

ELSEWHERE

PAM4F03 Elsewhere Frequency

PAM4O01 Onset

/ /

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Definitions and questions	Coding rules	Codes

BEHAVIORAL INHIBITION

Child becomes constricted and constrained and/or withdrawn and/or fearful when confronting or interacting with an unfamiliar adult or child or facing new situations or new objects. Consider also Social Anxiety and Inhibition during Social Interactions.

How does X act when s/he meets new people?

Does s/he become very quiet?

Withdrawn or reserved?

Does s/he hide behind you?

Does s/he freeze or become very still?

Do you have to encourage him/her to speak to the other person?

Does s/he speak with a very soft voice?
Does s/he pull or turn away when meeting a new person?
Or hide behind something else like a piece of furniture?
How long does it usually take for him/her to "warm up" to an unfamiliar person?
Can you give me an example?
Can you tell me about the last time?
When did s/he start acting this way?
Does s/he act this way when s/he meets unfamiliar adults?
How about with unfamiliar children?
How about new situations or new toys or objects?
Like going to a new place such as a different ice cream store or the home of a new friend?
How about new objects or toys?
Does it take him/her time to approach the toy or object?
Does s/he act this way in all settings?
Or only in certain settings?

BEHAVIORAL INHIBITION

0 = Absent

2 = Present but the child's inhibition usually decreases within five minutes of meeting an unfamiliar person, situation, or object.

3 = Present and child's inhibition is not reduced within five minutes when interacting with an unfamiliar person or new situation.

4 = Child has not encountered strange adult or child or new situation in last 3 months, but would, most likely, react with inhibitions if had.

PUA1I01
Intensity

PUA1O01
Onset

/ /

WITH UNFAMILIAR ADULTS

0 = Absent

2 = Present

PUA1X01

WITH UNFAMILIAR CHILDREN

0 = Absent

2 = Present

PUA1X02

NEW SITUATIONS

0 = Absent

2 = Present

PUA1X03

NEW THINGS/OBJECTS

0 = Absent

2 = Present

PUA1X04

HOME

PUA1F01
Home
Frequency

DAYCARE/SCHOOL

PUA1F02
Daycare/School
Frequency

ELSEWHERE

PUA1F03
Elsewhere
Frequency

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Definitions and questions

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Codes

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Definitions and questions	Coding rules	Codes

DEPRESSED AFFECT

Now we are going to talk about some of X's feelings. N.B. GET EXAMPLES OF BEHAVIOR AND CONSIDER CODING FOR INCAPACITY
DEPRESSED MOOD

Feelings of low mood. Includes feeling unhappy, miserable, blue, low spirited, being down in the dumps or dejected.

Distinguish from other unpleasant affects e.g. Nervous Tension or Anxiety, Apathy and Anhedonia. It is also important to make sure that it is the mood itself that is being rated and not its "expected" concomitants (such as apathy, self depreciation or crying). Items such as these are rated separately. If they are used as evidence of depression as well, spurious relationships will be generated by the interviewer.

Has s/he been feeling "down" at all?

Has s/he been acting very unhappy, or depressed?

Does s/he cry because of this feeling?
What was that like?
Was it serious?
What did you notice?
If I had seen him/her then would I have been able to tell?
What made him/her feel "miserable"?

How much of the time does s/he feel like that?
Does s/he act sad or depressed all the time?
Or only some of the time?
What happens when s/he's doing something else?

When s/he feels "miserable", how long does it last?
Can you do anything to cheer him/her up?

When did it start?

IF PRESENT, ASK;

Was there a week when s/he felt "miserable" most days?

Were there two weeks when s/he was "miserable" on at least 8 days?

IF DEPRESSED MOOD PRESENT, ASK;

Has there been a period of at least 2 months in the last year when s/he didn't feel like that?

Coding rules column:

DEPRESSED MOOD

0 = Absent

2 = The depressed mood is sometimes intrusive but also sometimes alleviated by enjoyable events or activities.

3 = Scarcely anything is able to lift the mood.

HOURS : MINUTES

EPISODE OF DEPRESSED MOOD

0 = Absent

2 = At least 1 week with 4 days depressed mood.

3 = Period of 2 consecutive weeks where depressed mood present on at least 8 days.

PERIOD OF 2 CONTINUOUS MONTHS WITHOUT DEPRESSED MOOD IN LAST YEAR?

0 = Present

2 = Absent

Codes column:

PDAOI01 Intensity

PDA0F01 Frequency

PDA0D01 Duration

PDA0O01 Onset

PDA0I02

PDA0I03

Definitions and questions	Coding rules	Codes

LOOKS UNHAPPY

Parent's evaluation that the child characteristically looks unhappy to an extent abnormal for the child's age or developmental stage.

Does s/he often look unhappy?

Does his/her face seem sad?

How much does s/he laugh or smile?
Is that similar to other children her age?
Is it less?
What about when nice things happen?
Does she look more cheerful then?

LOOKS UNHAPPY

0 = Absent

2 = Child looks unhappy in at least 2 activities but looks more cheerful at times.

3 = Child hardly ever looks normally cheerful.

HOURS : MINUTES

PDG0I01
Intensity

PDG0F01
Frequency

PDG0D01
Duration

PDG0O01
Onset

/ /

IF "DEPRESSED MOOD" OR "LOOKS UNHAPPY" PRESENT, CONTINUE. OTHERWISE, SKIP TO "REPORTED TEARFULNESS AND CRYING", (PAGE 7).

Definitions and questions	Coding rules	Codes

ALLEVIATION OF DEPRESSED MOOD BY SELF-GENERATED MEANS

Alleviation of depressed mood refers to means that the child may find effective in alleviating his/her depressed mood.

Alleviation by self generated means: The child alleviates mood by actively involving him/herself in other thoughts or activities.

N.B.: BOTH ALLEVIATION BY SELF-GENERATED MEANS AND EXTERNAL MEANS MAY BE PRESENT.

N.B.: ALLEVIATION NOT APPLICABLE IF SUBJECT RATED 0 OR 3 ON "DEPRESSED MOOD". IF "DEPRESSED MOOD" IS NOT PRESENT AS DEFINED IN THE GLOSSARY, IT CANNOT BE RELEIVED. IF THE DEPRESSED MOOD IS PRESENT AT AN INTENSITY LEVEL 3 THEN IT IS, BY DEFINITION, ESSENTIALLY UNALLEVIABLE. CODE AS "NEVER EMPLOYED".

When s/he feels "miserable", can anything cheer him/her up?

What?

Can s/he do things to cheer him/herself up?

How long would it cheer him/her up?
Or make him/her feel better?

ALLEVIATION BY SELF-GENERATED MEANS

0 = Means of Alleviation never employed.

2 = Means of Alleviation employed at least sometimes.

PDA2101
Intensity

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Definitions and questions	Coding rules	Codes

ALLEVIATION OF DEPRESSED MOOD BY EXTERNAL MEANS

Alleviation of depressed mood refers to means that the child may find effective in alleviating his/her depressed mood.

Alleviation by external means: The mood is alleviated by a more passive process in which other activities or events occurring without the child's willful use of them for this purpose alleviated depressed mood.

N.B.: BOTH ALLEVIATION BY SELF-GENERATED MEANS AND EXTERNAL MEANS MAY BE PRESENT.

N.B.: ALLEVIATION NOT APPLICABLE IF SUBJECT RATED 0 OR 3 ON "DEPRESSED MOOD". IF "DEPRESSED MOOD" IS NOT PRESENT AS DEFINED IN THE GLOSSARY, IT CANNOT BE RELEIVED. IF THE DEPRESSED MOOD IS PRESENT AT AN INTENSITY LEVEL 3 THEN IT IS, BY DEFINITION, ESSENTIALLY UNALLEVIABLE. CODE AS "NEVER EMPLOYED".

When s/he feels "miserable," can you or others do anything to cheer him/her up?

Does s/he cheer up when s/he takes part in an activity?

Like playing with other children?

Or going out for ice cream or a treat?

How much of the time would things "cheer" him/her up?

ALLEVIATION BY EXTERNAL MEANS

0 = Means of Alleviation never employed.

2 = Means of Alleviation employed at least sometimes.

PDA2I02
Intensity

DIURNAL VARIATION OF MOOD - AM WORST

Depressed mood is consistently worse in the first half of the day, irrespective of external events.

The parent must report a difference in the intensity of the depressed mood that is of a degree noticeable to others.

Is there any time of the day when s/he feels more "depressed" or "sad" than others?

Does s/he feel more "sad" in the morning?
What do you notice when s/he feels worse?
How long does the worst time last?

AM WORST

0 = Absent

2 = Present

PDA3I01
Intensity

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Definitions and questions	Coding rules	Codes

DIURNAL VARIATION OF MOOD - PM WORST

Depressed mood is consistently worse in the second half of the day, irrespective of external events.

The parent must report a difference in the intensity of the depressed mood that is of a degree noticeable to others.

Is there any time of the day when s/he feels more "depressed" or "sad" than others?

Does s/he feel more "sad" in the afternoon or evening?
What do you notice when s/he feels worse?
How long does the worst time last?

P.M. WORST

0 = Absent

2 = Present

PDA3I02
Intensity

SEASONAL VARIATION OF MOOD

Persistent, consistent fluctuation of mood occurring during specific seasons (i.e. winter, spring, summer, and/or fall). May occur in one or more of the seasons.

The parent must report a difference in the intensity of the child's depressed mood that is of a degree noticeable to others. No change (absent), worsening of depressed mood, or improvement of depressed mood should be noted for each season.

NOTE: IF THERE IS A SIGNIFICANT VARIATION OF MOOD DUE TO SEASONAL CHANGES (WORSENING OR IMPROVEMENT), BE PREPARED TO DISCUSS MANIA SECTION IN DETAIL.

Are there any times of the year when s/he feels more "depressed" or "sad"?

Is s/he more "depressed" or "sad" during the winter?

Or spring?

Or summer?

Or fall?

Are there any times of the year when his/her mood actually improves?

NOTE: IF THERE IS A SIGNIFICANT VARIATION OF MOOD DUE TO SEASONAL CHANGES (WORSENING OR IMPROVEMENT), BE PREPARED TO DISCUSS MANIA SECTION IN DETAIL.

SEASONAL VARIATION OF MOOD

0 = Absent

2 = Present

WINTER

0 = Absent

2 = Worse

3 = Improved

SPRING

0 = Absent

2 = Worse

3 = Improved

SUMMER

0 = Absent

2 = Worse

3 = Improved

FALL

0 = Absent

2 = Worse

3 = Improved

PDG3I90
Intensity

PDG3X01

PDG3X02

PDG3X03

PDG3X04

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AGITATION

Markedly changed motor activity associated with depressed mood. In moderate degree it is shown by fidgeting various parts of the body and an inability to stay still. In severe degree, it is expressed by pacing up and down and wandering about and an inability to sit down for very long. In all degrees, it must appear to be accompanied by unpleasant affect.

DO NOT INCLUDE SIMPLE RESTLESSNESS OR FIDGETINESS IN THE ABSENCE OF MOOD CHANGE.

Does s/he get very restless when s/he's "miserable?"

Does s/he have difficulty keeping still when depressed?

Does s/he wander about without seeming to have a purpose when s/he is depressed?

What is that like?
Can you calm him/her down?
How?

Is s/he always like that?
How about when s/he's not "miserable?"

How long does it last?

When did the "agitation" start?

AGITATION

0 = Absent

2 = Agitation is present in at least 2 activities and cannot be entirely controlled, but sometimes the child can inhibit his/her agitation with effort.

3 = Agitation almost entirely uncontrollable.

HOURS : MINUTES

PDA5I01
Intensity

PDA5F01
Frequency

PDA5D01
Duration

PDA5O01
Onset

/ /

C-50

Definitions and questions	Coding rules	Codes

REPORTED TEARFULNESS AND CRYING

Eyes filling with tears or actual shedding of tears as a response to an internal state of unhappiness or misery.

Do not rate crying precipitated by usual precipitants (such as sad situations or anger or being spanked or disciplined).

Does s/he ever feel so "miserable" that s/he wants to cry?

Even when it seems that nothing has happened to warrant crying?
What happens then?
Does s/he actually cry?

Can s/he stop him/herself?
What does s/he do?
How?

How long does it last?
When was the last time?
Tell me about it.
Does s/he cry more easily than s/he used to?
Does s/he cry more than other children?

When did s/he start being tearful?

REPORTED TEARFULNESS AND CRYING

0 = Absent

2 = When feeling miserable, the eyes fill with tears, or shed tears, at least sometimes uncontrollably, in at least 2 activities.

3 = When feeling miserable, the eyes nearly always uncontrollably fill with, or shed, tears in most activities.

HOURS : MINUTES

PDA4I01
Intensity

PDA4F01
Frequency

PDA4D01
Duration

PDA4O01
Onset

/ /

EASILY FRUSTRATED

The child is generally more prone to feelings of frustration, under minor provocation than most children.

This pattern need not represent a change in behavior.

Does s/he become frustrated very easily?

What sorts of things frustrate him/her?
Does s/he get frustrated more easily than most children his/her age, do you think?

What happens?

How often does that sort of thing happen?

How long has s/he been like that?

EASILY FRUSTRATED

0 = Absent

2 = Present

HOURS : MINUTES

PDF7I01
Intensity

PDF7F01
Frequency

PDF7D01
Duration

PDF7O01
Onset

/ /

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Definitions and questions | Coding rules | Codes

ANGER AND IRRITABILITY

The three items making up this section may lead to confusion unless careful attention is paid to the definitions. In essence, anger and irritability are being assessed at two levels: that of proneness to feelings of anger (as in Touchy or Easily Annoyed) , and that of angry behavior (as in Angry or Resentful). For these first two items, a change does not have to have been noted, so that a child who had always been like this would be coded positively here. Irritability requires the presence of both increased proneness to feelings of anger and angry behavior. It also requires that a change must have been observed, but does not stipulate that the mood or behavior need occur more than in most children. Thus all three of these items may be rated as being present in the same person.

TOUCHY OR EASILY ANNOYED

The child is generally more prone to FEELINGS of anger bad temper, short temper, resentment, sulking or annoyance, UNDER MINOR PROVOCATION than most children. This pattern need not represent a change in behavior.

Do things get on his/her nerves easily?

What sorts of things?
Does s/he get annoyed more easily than most children, do you think?

What does s/he do?

How often does that sort of thing happen?

How long has s/he been like that?

TOUCHY OR EASILY ANNOYED

0 = Absent

2 = Present

HOURS : MINUTES

PDA6I01
Intensity

PDA6F01
Frequency

PDA6D01
Duration

PDA6O01
Onset

/ /

Definitions and questions	Coding rules	Codes

ANGRY OR RESENTFUL

The child is generally more prone to MANIFESTATIONS of anger or resentment (such as snappiness, shouting, quarreling or sulking) under minor provocation, than most children.

This pattern need not represent a change in behavior.

Does s/he get angry very often?

How often?
What happens?
How often does that happen?
Does s/he get "sulky" or "pout"?

How often?
What does s/he do?
How often does that happen?

How long has s/he been like that?

ANGRY OR RESENTFUL

0 = Absent

2 = Present

HOURS : MINUTES

PDA7I01
Intensity

PDA7F01
Frequency

PDA7D01
Duration

PDA7O01
Onset

/ /

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Definitions and questions	Coding rules	Codes

IRRITABILITY

Increased ease of precipitation of externally directed feelings of anger, bad temper, short temper, resentment, or annoyance. (Change may predate the primary period and continue into at least part of the primary period.)

Note that this rating is of a change in the child's usual liability to be precipitated into anger, it does not refer to the form of the anger once it has been precipitated.

N.B.: The irritable mood itself is being rated, not just its manifestations; thus, frequency and duration ratings refer to the number and length of episodes of the mood, not of the episodes of snappiness, shouting or quarrelsomeness.

N.B. INFORMATION OBTAINED HERE MAY ALSO BE RELEVANT TO LOSING TEMPER AND TEMPER TANTRUMS.

Has s/he been more irritable than usual in the last 3 months?

Or made angry more easily?

Has s/he had more tantrums than usual in the last 3 months?

What has s/he been "touchy" about?
Is that more than usual?
What does s/he do when s/he feels like that?

How long does it last when s/he feels like that?
Has s/he been snappy with people in the family?
Has s/he gotten into arguments or fights lately?
What has happened?
What did s/he say?
What did s/he do?
Has s/he hit or broken anything when s/he was angry?

When did s/he start to get "irritable" like that?

IF PRESENT, ASK;

Was there a week when s/he felt "irritable" most days?
Were there two weeks when s/he was "irritable" on at least 8 days?

IF IRRITABILITY PRESENT ASK;

Has there been a period of at least 2 months in the last year when s/he didn't feel like that?
IF PRESENT, ASK;

In the last 3 months has there been a week when s/he was irritable like that every day?

IRRITABILITY

0 = Absent

2 = Irritable mood present in at least 2 activities manifested by at least one instance of snappiness, shouting, quarrelsomeness and at least sometimes uncontrollable by child.

3 = Irritable mood present in most activities, accompanied by snappiness, shouting, quarrelsomeness, and nearly always uncontrollable by child.

HOURS : MINUTES

EPISODE OF IRRITABLE MOOD

0 = Absent

2 = At least 1 week with 4 days irritable mood.

3 = Period of 2 consecutive weeks where irritable mood present on at least 8 days.

PERIOD OF 2 CONTINUOUS MONTHS WITHOUT IRRITABLE MOOD IN LAST YEAR

0 = Present

2 = Absent

PDA8I01 Intensity

PDA8F01 Frequency

PDA8D01 Duration

PDA8O01 Onset
/   /

PDA8I02

PDA8I03

Definitions and questions	Coding rules	Codes

if irritable present for a week (7 consecutive days), remember to complete the mania section.

Depression

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CONATIVE PROBLEMS

BOREDOM

Activities the child is actually engaged in are felt to be dull and lacking in interest while interest in other possible potential activities is expressed.

Everyone gets bored sometimes, so code a child positively here only if s/he is more often bored than not. But code positive even if the activities are truly dull. It must seem to the child that other potential activities would be of interest even if s/he is uncertain what those other activities might be.

Differentiate from anhedonia and loss of interest, where nothing seems to be of potential interest or likely to give pleasure.

Code even if the activities described are truly boring in your opinion.

How much of the time is s/he bored, do you think?

Does s/he get bored more than other people?

IF PRESENT ASK;

What activities are boring to him/her?

Can s/he do anything to stop from being bored?
Is there something that s/he would like to be doing?

How long has s/he been feeling so bored?

Coding rules

BOREDOM

0 = Absent

2 = More than half the time.

3 = Almost all the time.

Codes

PDB0101
Intensity

PDB0O01
Onset

/ /

C - 56

Definitions and questions	Coding rules	Codes

LOSS OF INTEREST

Diminution of the child's interest in usual pursuits and activities.

Either some interests have been dropped or the intensity of interest has decreased. Everyone has interests of some sort, but the extent of the diminution must be measured in the context of the range and depth of the child's usual activities. Take into account everyday daycare/school and home activities as well as watching TV, playing games, taking an interest in clothes, food, appearance, toys, etc. Inevitably, those with more intense and varied interests initially will have more room to lose interest than those who have never taken a great interest in things.

Distinguish from

Have things been interesting him/her as much as usual?

Like his/her toys or friends?

Have you noticed that s/he isn't interested in doing things that s/he used to care a lot about?

Has s/he lost interest in anything?

IF PRESENT ASK;

What kinds of things has s/he lost interest in?
Can you get him/her interested in anything?
Can anybody?

When did s/he start to lose interest in things?

LOSS OF INTEREST

0 = Absent

2 = Generalized diminution in interest taken in normally interesting activities.

3 = The child is completely or almost completely uninterested in everything or nearly everything.

PDB1101
Intensity

PDB1O01
Onset

/ /

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Definitions and questions | Coding rules | Codes

LACK OF PROTEST

Near absence of child's resistance and/or reaction in situations when protest or reaction would be expected.

Change may predate the primary period, but must have continued into the primary period.

Have you noticed that X protests or resists less than other children his/her age?

Or less than s/he used to?

Is s/he overly compliant about things?

Like when you are putting him/her to bed?
Or combing his/her hair?
Or changing his/her diaper?
Or tending a cut?
Is this a change for X?
When did that change occur?

When did that change occur?

Coding rules

LACK OF PROTEST

0 = Absent

2 = Present

Codes

PDF9I01
Intensity

PDF9O01
Onset

/ /

Definitions and questions	Coding rules	Codes

ANHEDONIA

A partial or complete loss or diminution of the ability to experience pleasure, enjoy things, or have fun. It also refers to basic pleasures like those resulting from eating favorite foods.

Anhedonia concerns the mood state itself. Loss of Interest, Loss of Initiative, Lack of Protest, inability to engage in activities, or loss of the ability to concentrate on looking at books, games, TV or school may accompany Anhedonia, so the interviewer may code different aspects under different items. Do not confuse this item with a lack of opportunity to do things or to excessive parental restriction. Comparison should be made with enjoyment when the child is normal. This may not be accessible in episodes of very long duration.

DISTINGUISH FROM BOREDOM AND LOSS OF INTEREST OR LACK OF OPPORTUNITIES FOR PARTICIPATION.

Can s/he have fun or enjoy him/herself?

Are there things s/he used to enjoy but doesn't anymore?

Like playing with certain toys?
Or doing certain things with you?
Does s/he seem to have lost enthusiasm for things that s/he used to enjoy?

When did s/he start to feel like that?
What things are fun (or enjoyable) now?

Coding rules:

ANHEDONIA

0 = Absent

2 = Generalized diminution in pleasure taken in normally pleasurable activities.

3 = Almost nothing gives pleasure.

Codes:

PDB2101
Intensity

PDB2O01
Onset

/ /

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Definitions and questions	Coding rules	Codes

ANERGIA

The child is markedly lacking in energy compared with usual state. The child is described as being easily fatigued and/or excessively tired. This is a general rating of child's overall energy level.

DIFFERENTIATE FROM MOTOR SLOWING (NEXT PAGE), AND FATIGABILITY (SLEEP SECTION), ALTHOUGH YOU MAY DOUBLE CODE IF CRITERIA FOR MORE THAN ONE ARE MET.

Does s/he have as much energy as s/he used to have?

Has s/he been as energetic as usual?

Has s/he been complaining of a lack of energy?

Has your child lost any of his/her usual energy?
Of feeling tired?
Has s/he been taking naps more often than usual or going to sleep earlier than s/he used to?
Does s/he have enough energy to do things?
How has that affected him/her?
Does s/he choose not to do things because s/he hasn't got enough energy?
Like swinging on a swing?
Or starting a drawing?
Or going on an outing?

When did s/he start feeling less energetic?

ANERGIA

0 = Absent

2 = A generalized listlessness and lack of energy.

3 = A report of being almost completely without energy.

PDB3101
Intensity

PDB3O01
Onset

/ /

C-60

Definitions and questions	Coding rules	Codes

MOTOR SLOWING

The child is slowed down in movement AND speech compared with his/her usual condition.

Has s/he been moving more slowly than s/he used to?

Does s/he do things more slowly than s/he used to?

· *Or talk more slowly?*

Can you give me an example?

How long does it last?
Can s/he do anything to speed him/herself up?
What?
Can you do anything?

When did s/he start to feel slowed down?

MOTOR SLOWING

0 = Absent

2 = Slowing present and cannot be overcome in at least 2 activities.

3 = Slowing present and cannot be overcome in almost all activities.

HOURS : MINUTES

PDB4I01
Intensity

PDB4F01
Frequency

PDB4D01
Duration

PDB4O01
Onset

/   /

INDECISIVENESS

Unpleasant difficulty in reaching decisions, even about simple matters. This is a general rating of child's ability to make decisions.

Is s/he good at making decisions (making up his/her mind)?

Why not?
Has s/he had any trouble making decisions?

Why?
When was the last time s/he had that sort of trouble?
What happens when s/he has to make up his/her mind?
Can you remember the last time that happened?
Has s/he always been like that?
Does it cause him/her any trouble?
What?

INDECISIVENESS

0 = Absent

2 = Sometimes uncontrollable in at least 2 activities.

3 = Almost always uncontrollable and occurring in relation to almost all decisions.

PDB6I01
Intensity

PDB6O01
Onset

/   /

C - 61

Coding rules

Codes

DEPRESSIVE THOUGHTS

In the definitions in this section the term "feeling" is frequently used, despite the fact that cognitions are being referred to. For most people, the term "feeling" carries both cognitive and affective components. However, these items refer not to mood states per se, but to certain cognitions, thoughts, opinions or attitudes. In other words, it is the content of the thought that is to be coded, not its affective tone.

LONELINESS

A feeling of being alone and/or friendless, regardless of the justification for the feeling.

Adult contacts and peer friendships should be considered. Differentiate from feeling unloved. A child may be lonely but still acknowledge being loved and vice versa.

NOTE RELEVANT INFORMATION FROM PEER RELATIONSHIPS.

Do you think s/he feels lonely?

How often is that?
When was the last time?
How did s/he feel then?
Sometimes children feel that they have no one who would help them. Does s/he ever feel like that?

Does s/he feel cared for by friends?
Does s/he feel lonely even though s/he has some friends?
Does s/he feel left out by others?
Does s/he get left out of other children's activities?
How does s/he feel about that?
Does s/he think that's likely to change?
Can you stop him/her feeling lonely?
What happens if you try?

When did s/he start to feel lonely like that?

LONELINESS

0 = Absent

2 = The child definitely feels intrusively and uncontrollably lonely, in at least 2 activities.

3 = S/he feels lonely almost all the time.

PDB9I01
Intensity

PDB9O01
Onset

/ /

Definitions and questions	Coding rules	Codes

FEELS UNLOVED

A generalized feeling of being unloved and uncared for, regardless of the justification for that feeling.

DIFFERENTIATE FROM LONELINESS.

RELEVANT INFORMATION TO CODE THIS ITEM MAY HAVE EMERGED IN THE FAMILY LIFE AND RELATIONSHIPS SECTION.

Sometimes children feel that no one loves them, even when they do. Does X feel like that at all?

What does s/he say?
Does X feel like s/he is loved less than other people?

Is s/he completely convinced that no one loves him/her?

When did s/he start to feel like that?
Who loves him/her?
Is there anyone else?

Coding rules

FEELS UNLOVED

0 = Absent

2 = The child feels that there are others who love him/her but that s/he is loved or cared for less than other people.

3 = The child feels that almost no one loves him/her, or hardly ever believes that anyone does.

Codes

PDC0I01
Intensity

PDC0001
Onset

/ /

C- 63

Definitions and questions	Coding rules	Codes

SELF-DEPRECIATION AND SELF-HATRED

An unjustified feeling of inferiority to others (including unjustified feelings of ugliness). Self-hatred involves severe hostility directed by the child against him/herself, accompanied by expressed dislike or expressed criticism.

Do not rate delusional phenomena here.

How do you think s/he feels about him/herself?

Does s/he like him/herself?

How does s/he feel about his/her appearance (looks)?
What is s/he like compared with others?
If s/he had to choose, would s/he say s/he was good-looking, average, or ugly?

Does s/he ever say that s/he is "stupid"?
Or a "jerk"?
Or a "bad" person?
How ugly does s/he think s/he is?
Does s/he feel much worse-looking than most people?
How much of the time does s/he feel like that?
Does s/he feel that she is good at certain things?

What things does s/he do that s/he is proud of?

Is there anything that s/he thinks s/he's good at?
As a person does s/he feel as good as other people?

Does s/he think s/he's any good at all?
Does s/he think everyone is better than s/he is?

When did s/he start to feel like this?

SELF-DEPRECIATION

0 = Absent

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior.

3 = The child feels almost entirely worthless and without saving graces, in nearly all activities, or inferior to everyone. Self-hatred is also rated here.

PDC1101
Intensity

PDC1001
Onset

/ /

Definitions and questions	Coding rules	Codes

FEELING SORRY FOR ONESELF

A feeling that life or people have been unfairly unpleasant or troubling and that the child deserves better. Child feels unlucky, victim of "bad luck".

Code regardless of justification.

Does s/he feel sorry for him/herself?

Does s/he think s/he's unlucky?

Does X feel that s/he deserves a better life?

In what way?
Does s/he feel like that all the time or only some of the time?
When does s/he feel like that?
Does s/he think everything is unfair or just some things?
Does s/he complain about it?
How much?
Does s/he feel it will always be like that?

When did s/he start to feel like that?

FEELING SORRY FOR ONESELF

0 = Absent

2 = The child feels sorry for him/herself but thinks that some aspects of life have not been unfairly troubling or unpleasant.

3 = The child thinks that nothing has occurred according to his/her just desserts, and feels sorry for him/herself in nearly all situations.

PDC2101
Intensity

PDC2001
Onset

/ /

Depression

C-65

Definitions and questions	Coding rules	Codes

PATHOLOGICAL GUILT

Excessive self-blame for minor or non-existent wrongdoings. Child realizes that guilt is exaggerated (otherwise, code as Delusions of Guilt).

Does s/he feel bad or guilty about anything that s/he's done?

What?

How often does s/he feel like that?
When was the last time?
Does s/he ever say that s/he is a "bad" person?

Does s/he blame him/herself for things that aren't his/her fault?

Why?
Does s/he feel that s/he deserves to have bad things happen to him/her?
Does s/he think s/he deserves to be punished, even when s/he has done nothing wrong?
Does s/he ever feel guilty about things that s/he knows aren't really his/her fault?
Does s/he feel that a lot of things that go wrong are his/her fault?

When did s/he start to feel that s/he was "to blame?"

IF PATHOLOGICAL GUILT IS PRESENT, CONTINUE. OTHERWISE, SKIP TO "HELPLESSNESS", (PAGE 23).

PATHOLOGICAL GUILT

0 = Absent

2 = At least partially unmodifiable excessive self-blame not generalized to all negative events.

3 = The child generalizes the feeling of self-blame to almost anything that goes wrong in his/her environment.

PDC3101
Intensity

PDC3001
Onset

/ /

C- 66

Definitions and questions	Coding rules	Codes

DELUSIONS OF GUILT

Delusional self-blame for minor or non-existent wrongdoings. Child DOES NOT realize that guilt is exaggerated.

The child may believe that s/he has brought ruin to his/her family by being in his/her present condition or that his/her symptoms are a punishment for not doing better. Distinguish from pathological guilt without delusional elaboration, in which the child is in general aware that the guilt originates within him/herself and is exaggerated.

Does s/he believe that s/he has committed a crime?

Or sinned greatly?

Does s/he think that s/he deserves to be punished?
Does s/he think that s/he might hurt or ruin other people?
What does s/he say?
Can you persuade him/her that these things aren't his/her fault?
What does she do about it?

HELPLESSNESS

The child feels that there is little or nothing s/he can do to improve his/her situation or psychological state, though such a change would be welcome. This is a generalized feeling.

Is there anything about the way things are or the way s/he is that s/he would like to change?

Does s/he feel helpless about his/her situation?
IF PRESENT ASK;

Is there anything s/he thinks s/he could do to make things better?

Or make him/herself feel better?

What?
Does s/he think it would work?

When did s/he start to feel this way?

DELUSIONS OF GUILT

0 = Absent

2 = The child has a delusional conviction of having done wrong but there is a fluctuating awareness that his/her feelings are an exaggeration of normal guilt.

3 = The child has an unmodifiable delusional conviction that s/he has sinned greatly, etc.

HELPLESSNESS

0 = Absent

2 = The child feels helpless and cannot always modify his/her feelings, but can report expectations of being able to help him/herself.

3 = The child expresses almost no hope of being able to help him/herself.

PDC4101
Intensity

PDC4001
Onset
/ /

PDC6101
Intensity

PDC6001
Onset
/ /

Definitions and questions	Coding rules	Codes

HOPELESSNESS

The child has a bleak, negative, pessimistic view of the future, and little hope that his/her situation will improve. This is a generalized feeling.

Does s/he seem hopeless about the future?

Does X think things will get better or worse for him/her when s/he's grown up?

How often?
Does s/he think anyone can help him/her?
Does s/he believe things will be better?
How often does s/he feel like that?
Can you do anything about it?

When did s/he start to feel this way?

HOPELESSNESS

0 = Absent

2 = The child feels hopeless and cannot always modify his/her feelings, but can report some positive expectations of the future.

3 = The child expresses almost no hope for the future at all.

PDC7I01
Intensity

PDC7O01
Onset

/ /

C-68

Definitions and questions	Coding rules	Codes

SUICIDE

Purposes of the Section

This section has 1 major function:

(1) To assess the suicidal and self injurious intentions and actions of the child.

Organization of the Section

The section is organized in 2 sub areas:

(1) Suicidal ideation and behavior.

(2) Non suicidal deliberate self harm.

SUICIDE AND SELF-INJURIOUS BEHAVIOR

Has s/he ever talked about death or dying?

Has s/he done so in the last three months?
Has s/he ever said s/he wanted to die?

Has s/he ever said life was not worth living?

Has s/he ever tried to hurt or kill him/herself?

When?
Why was that?
What happened?
Has s/he tried more than once?
What?
Has s/he ever done anything that made people think s/he wanted to die?

When was that?
What happened?
CONTINUE WITH SECTION REGARDLESS WHETHER SCREEN POSITIVE OR NEGATIVE.

How about in the last three months?

SUICIDE SCREEN POSITIVE

0 = Absent

2 = Present

SUICIDE SCREEN POSITIVE

0 = Absent

2 = Present

Ever:PDC8E01
Intensity

PDC8I02
Intensity

Depression

C-69

| Definitions and questions | Coding rules | Codes |

DEATH THEMES IN PLAY

Persistent preoccupation with themes of death in play (e.g., drawing pictures, imaginary play).

Distinguish from "Suicidal Themes in Play".

Has s/he ever drawn pictures about death or dying?

Has s/he ever played games about death?

Has s/he ever told stories about death or dying?

Or about people who have died?
Or about being dead him/herself?
How many times has s/he ever done that?
When was the first time that s/he did that?
Has this happened in the last in the last 3 months?
How often has s/he done that in the last 3 months?
Or about people who have killed themselves?
Or about killing him/herself?
How many times has s/he ever done that?
When was the first time that s/he did that?
Has this happened in the last 3 months?
How often has s/he done that in the last 3 months?

How about in the last three months?

EVER: DEATH THEMES IN PLAY

0 = Absent

2 = Present

Ever:PDG1E01
Intensity

Ever:PDG1V01
Frequency

Ever:PDG1O01
Onset

/ /

DEATH THEMES IN PLAY

0 = Absent

2 = Present

PDG1I01
Intensity

PDG1F01
Frequency

SUICIDAL THEMES IN PLAY

Persistent preoccupation with themes of suicide (e.g., subject or others attempting to or succeeding in killing self) in play (e.g., drawing pictures, imaginary play).

Has s/he ever played games in which s/he or another character in the game kills him/herself?

Or about people who have killed themselves?
Or about killing him/herself?
How many times has s/he ever done that?
When was the first time that s/he did that?
Has this happened in the last 3 months?
How often has s/he done that in the last 3 months?

How about in the last three months?

SUICIDE THEMES IN PLAY

0 = Absent

2 = Present

Ever:PDG2E01
Intensity

Ever:PDG2V01
Frequency

Ever:PDG2O01
Onset

/ /

SUICIDE THEMES IN PLAY

0 = Absent

2 = Present

PDG2I01
Intensity

PDG2F01
Frequency

Definitions and questions	Coding rules	Codes

THINKING ABOUT DEATH

Thoughts about death and dying, whether referred to self or others.

Include thoughts about not being able to go on any longer and life not being worth living. Include discussion about a grandparent who has died ("Do they go to heaven?" "What will happen when I die?") To code, thoughts must be intrusive into at least two activities.

CODE THOUGHTS ABOUT TAKING ONE'S OWN LIFE UNDER SUICIDAL THOUGHTS (NEXT PAGE).

Does s/he seem to think about death or dying?

What does s/he think about?

How much does s/he think about it?
Does s/he sometimes wish s/he were dead?
Does s/he want to die?
Why does s/he feel like that?

How long has s/he been thinking like that?

SUICIDAL THOUGHTS

Thoughts specifically about killing oneself, by whatever means, with some intention to carry them out.

This may accompany thinking about death in general, or may be present if a child has reported a suicidal plan or past attempt.

Do not include suicidal plans.

Does s/he ever think about ending it all?

What does s/he say about it?
When was the last time?
What does s/he think about?
Have there been other times?
Do you think s/he actually is going to do this?

IF SUICIDAL THOUGHTS NOT PRESENT, SKIP TO "SUICIDAL ATTEMPTS", (PAGE 28).

Coding rules:

THINKING ABOUT DEATH

0 = Absent

2 = Present but not including thoughts about wanting to die. The thoughts should be intrusive into at least 2 activities and at least sometimes uncontrollable.

3 = Including thoughts about wanting to die. The thoughts should be intrusive into at least 2 activities and at least sometimes uncontrollable.

SUICIDAL THOUGHTS

0 = Absent

2 = At least sometimes uncontrollable suicidal thoughts, recurring in at least 2 activities.

3 = Usually uncontrollable suicidal thoughts intruding into most activities.

Codes:

PDC9I01 Intensity

PDC9F01 Frequency

PDC9O01 Onset

/ /

PDD0I01 Intensity

PDD0F01 Frequency

PDD0O01 Onset

/ /

Definitions and questions	Coding rules	Codes

SUICIDAL PLANS

Suicidal thoughts that contain plans of a suicidal act and some intent to carry them out.

If suicidal attempt has been made, determine whether a plan was present prior to the attempt.

Has s/he thought about actually killing him/herself?

Has s/he had a plan?

Has s/he thought what s/he might do?
Do you think s/he might do this?
Has s/he done anything to prepare for killing him/herself?
What?
How did you find out?

SUICIDAL PLANS

0 = Absent

2 = A specific plan, considered on more than 1 occasion, over which no action was taken.

3 = A specific plan, considered on more than 1 occasion, with preparatory action taken, for example storing up pills.

PDD1I01 Intensity

PDD1F01 Frequency

PDD1O01 Onset
/ /

SUICIDAL ATTEMPTS

Episodes of deliberately self-harmful behavior involving some intention to die at the time of the attempt. Rate here, no matter how unlikely the attempt was to cause death, so long as the child's intention was to die. If parent unsure about intention to die, code if the parent can describe a clear self-harmful event.

Has s/he ever actually tried to kill him/herself?

What happened?
Where did s/he do it?
Were there any people around at the time?
Do you know how s/he was feeling then?
Did s/he really want to die?
What happened?
Who found him/her?
Did s/he go to the hospital?

When did s/he first try to kill him/herself?

When did s/he last try to kill him/herself?

How many times has s/he tried?

How does s/he think about it now?
Would s/he do it again if s/he had the chance?
Does s/he still wish s/he were dead?
Is there anything you can do about that?

SUICIDAL BEHAVIOR

0 = Absent

2 = Present

DATE OF FIRST ATTEMPT

DATE OF LAST ATTEMPT

Ever:PDD2E01 Intensity

Ever:PDD2O01
/ /

Ever:PDD2O02
/ /

Ever:PDD2V01 Frequency

SUICIDAL BEHAVIOR IN LAST 3 MONTHS

0 = Absent

2 = Present

PDD2I01 Intensity

PDD2F01 Frequency

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Definitions and questions	Coding rules	Codes
IF A SUICIDE ATTEMPT HAS (EVER) BEEN MADE COMPLETE EVER: METHOD, EVER: INTENT, AND EVER: LETHALITY. IF ATTEMPT MADE IN THE PAST 3 MONTHS, ALSO COMPLETE ITEMS ABOUT THE RECENT ATTEMPT(S): METHOD, INTENT, AND LETHALITY. **IF NO SUICIDE ATTEMPTS MADE, SKIP TO "NON-SUICIDAL PHYSICAL SELF-DAMAGING ACTS", (PAGE 34).**		

Definitions and questions	Coding rules	Codes

EVER: METHODS OF SUICIDE ATTEMPT(S)

Methods of self harm used with the intention of ending life. Rate here, no matter how unlikely to cause death the attempt was, so long as the child's intention was to die.

SUICIDE ATTEMPTS PRESENT

Ever:PDD3E90 Intensity

0 = Absent

2 = Present

DRUG OVERDOSE

Ever:PDD3E08

0 = Absent

2 = Present

HANGING

Ever:PDD3E03

0 = Absent

2 = Present

STABBING/CUTTING

Ever:PDD3E04

0 = Absent

2 = Present

SHOOTING

Ever:PDD3E05

0 = Absent

2 = Present

RUNNING INTO TRAFFIC

Ever:PDD3E06

0 = Absent

2 = Present

THROWING SELF DOWN STAIRS

Ever:PDD3E09

0 = Absent

2 = Present

JUMPING FROM A HIGH PLACE

Ever:PDD3E10

0 = Absent

2 = Present

TRIED TO OPEN DOOR WHILE IN MOVING VEHICLE

Ever:PDD3E12

0 = Absent

2 = Present

JUMP FROM MOVING VEHICLE

Ever:PDD3E11

0 = Absent

2 = Present

OTHER

Ever:PDD3E07

0 = Absent

2 = Present

Specify

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Definitions and questions	Coding rules	Codes

IF SUICIDE ATTEMPT(S) MADE IN THE LAS 3 MONTHS, COMPLETE METHODS OF SUICIDE ATTEMPT(S) (NEXT PAGE). OTHERWISE, SKIP TO "SUICIDAL INTENT", (PAGE 33).

Definitions and questions	Coding rules	Codes

METHODS OF SUICIDE ATTEMPT(S)

Methods of self harm used in the last 3 months with the intention of ending life. Rate here, no matter how unlikely to cause death the attempt was, so long as the child's intention was to die.

SUICIDE ATTEMPT(S) PRESENT IN THE LAST 3 MONTHS

PDD4190 Intensity

0 = Absent

2 = Present

DRUG OVERDOSE PDD4108

0 = Absent

2 = Present

HANGING PDD4103

0 = Absent

2 = Present

STABBING/CUTTING PDD4104

0 = Absent

2 = Present

SHOOTING PDD4105

0 = Absent

2 = Present

RUNNING INTO TRAFFIC PDD4106

0 = Absent

2 = Present

THROWING SELF DOWN STAIRS PDD4109

0 = Absent

2 = Present

JUMPING FROM A HIGH PLACE PDD4110

0 = Absent

2 = Present

TRIED TO OPEN DOOR WHILE IN A MOVING VEHICLE PDD4112

0 = Absent

2 = Present

JUMP FROM MOVING VEHICLE PDD4111

0 = Absent

2 = Present

OTHER PDD4107

0 = Absent

2 = Present

Specify

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Definitions and questions	Coding rules	Codes

SUICIDAL INTENT

Code the highest level of suicidal intent manifested in an attempt. Do not include potentially self-injurious behavior without suicidal intent here.

Which time was s/he most serious about killing him/herself?

What did s/he do?
Do you think s/he really wanted to die?
IF ATTEMPT IN THE PAST 3 MONTHS, ASK;

Was s/he serious about killing him/herself when s/he tried in the last 3 months?

SUICIDAL INTENT

1 = Child reports minimal intention to actually kill him/herself, but either revealed the attempt to others, or otherwise ensured that there was little risk to take his/her life.

2 = Substantial intent to kill self, but associated with ambivalence to a sufficient degree that the intention was not absolute.

3 = Absolute (or almost absolute) intention to commit suicide, expressed with little or no ambivalence or uncertainty. If uncertain whether to code 2 or 3, code 2.

Ever:PDD5E01
Intensity

SUICIDAL INTENT

1 = Child reports minimal intention to actually kill him/herself, but either revealed the attempt to others, or otherwise ensured that there was little risk to take his/her life.

2 = Substantial intent to kill self, but associated with ambivalence to a sufficient degree that the intention was not absolute.

3 = Absolute (or almost absolute) intention to commit suicide, expressed with little or no ambivalence or uncertainty. If uncertain whether to code 2 or 3, code 2.

PDD5I01
Intensity

LETHALITY OF SUICIDAL ATTEMPT

Code here the degree of threat to life resulting from the most serious suicidal attempt.

LETHALITY OF SUICIDAL ATTEMPT

1 = Mild: No Medical attention needed or sought.

2 = Moderate: Some medical attention sought or required (e.g., sewing up cuts, stomach lavage).

3 = Serious: The attempt resulted in unconsciousness, the need for resuscitation, assisted respiration, blood transfusion, or operative intervention.

Ever:PDD7E01
Intensity

LETHALITY OF SUICIDAL ATTEMPT

1 = Mild: No Medical attention needed or sought.

2 = Moderate: Some medical attention sought or required (e.g., sewing up cuts, stomach lavage).

3 = Serious: The attempt resulted in unconsciousness, the need for resuscitation, assisted respiration, blood transfusion, or operative intervention.

PDD7I01
Intensity

Definitions and questions	Coding rules	Codes

NON-SUICIDAL PHYSICAL SELF-DAMAGING ACTS

Self-mutilation, etc., not accompanied by any wish or intention to die (e.g., cutting on skin with a knife, buring self, deliberately putting finger in door jam and closing door, wrist-slashing or cigarette burns).

Has s/he ever hurt him/herself on purpose (apart from when s/he wanted to die)?

Or cut him/herself on purpose?

Why did s/he do it?
What did s/he feel like before s/he did it?
Did it make him/her feel better?
Did s/he want to kill him/herself?

How about in the last three months?

NON-SUICIDAL PHYSICAL SELF-DAMAGING ACTS

0 = Absent

2 = Acts not receiving medical treatment.

3 = Acts receiving medical treatment (simple attending hospital counts as treatment).

Ever:PDE0E01 Intensity

Ever:PDE0V01 Frequency

Ever:PDE0O01 Onset

/ /

NON-SUICIDAL PHYSICAL SELF-DAMAGING ACTS

0 = Absent

2 = Acts not receiving medical treatment.

3 = Acts receiving medical treatment (simple attending hospital counts as treatment).

PDD9I01 Intensity

PDD9F01 Frequency

Definitions and questions	Coding rules	Codes

HYPOMANIA AND MANIA
MANIC MOOD DISTURBANCE

REMEMBER TO GET EXAMPLES AND
BEHAVIORAL DESCRIPTIONS.

EXPANSIVE MOOD

Feelings of euphoria or elation which represents a
substantial change from the child's usual mood and which
are not a response to specific situations.

Do not include responses to happy events (such as
birthdays, holidays, etc.).

IF EXPANSIVE MOOD IS PRESENT BE PREPARED TO
RECONSIDER PREVIOUS RATINGS OF IRRITABILITY.

Have you noticed a change in his/her mood?

*Has s/he had times when s/he felt really happy ("super
happy") for no special reason?*

*Did s/he seem to feel extraordinarily good about
him/herself?*

*Has s/he had a time when s/he seemed "over the top" in a
silly or giddy way that seems in appropriate for the
situation?*
*Like laughing, singing, or making noises at very
inappropriate times?*
IF PRESENT ASK;

What did s/he do?

When s/he was feeling that way, was s/he acting very silly?
Or super energetic?
Or reckless?
Did you think s/he was "over the top"?
Did you or anyone else comment on his/her behavior?

What did you do?
IF EXPANSIVE MOOD IS PRESENT BE PREPARED TO
RECONSIDER PREVIOUS RATINGS OF IRRITABILITY.

How long did that feeling last?

When did s/he first have it?

Coding rules column:

EXPANSIVE MOOD

0 = Absent

2 = The expansive mood is intrusive into
non-elating situations, but can sometimes
be controlled when inappropriate.

3 = Expansive mood is intrusive and
uncontrollable in almost all activities and
often inappropriate.

HOURS : MINUTES

Codes column:

PDE2I01
Intensity

PDE2F01
Frequency

PDE2D01
Duration

PDE2O01
Onset

/ /

C-79

Definitions and questions	Coding rules	Codes

IF EXPANSIVE MOOD PRESENT, COMPLETE. OTHERWISE, SKIP TO "ABRUPT SHIFTS IN AFFECT (MOOD SWINGS)", (PAGE 4).

C-80

Definitions and questions	Coding rules	Codes

EXPANSIVE MOOD - SPONTANEITY/REACTIVITY

Degree to which expansive mood is related to or independent of external events.

Does s/he seem super happy only when something very exciting is happening (e.g., birthday party, trip to Disneyland, etc.)

Does s/he ever seem super happy for no reason?

How often does s/he seem super happy 'out of the blue' or for no reason?

How long does this super happy mood for no reason last?

When did you first notice that s/he would get super happy for no reason?

EXPANSIVE MOOD - CONCERN TO ADULT

Do you think it is a problem?
Are you concerned about 'X' super happy moods?

Is anyone else concerned about his/her super happy moods? Who?

Has anyone commented that s/he seems to be too happy at times? Who?

EXPANSIVE MOOD - SPONTANEITY/REACTIVITY

0 = Absent

2 = Expansive mood at times in the absence of positive events.

HOURS : MINUTES

ADULT CONCERN

0 = Absent

2 = Present

WHO IS CONCERNED (CODE ALL THAT APPLY)

1 = Parent 1.

2 = Parent 2.

3 = Other Parent 1.

4 = Other Parent 2.

5 = Teacher/childcare provider.

6 = Other adult.

PDAL151
Intensity

PDAL152
Frequency

PDAL153
Duration

PDAL154
Onset

/ /

PDAL155
Intensity

PDAL156

PDAL157

PDAL158

PDAL159

PDAL160

PDAL161

Definitions and questions	Coding rules	Codes

EXPANSIVE MOOD - ALLEVIATION

When s/he feels 'super happy,' can you do anything to settle him/her down?

What?
How long would it keep him/her settled?
How much of the time would things settle him/her down?
Can you do anything to settle him/her down?
Can s/he do anything to settle him/herself down?

EXPANSIVE MOOD - ALLEVIATION

0 = Child's mood is always and easily brought to baseline by attempts to "settle" or calm.

2 = Child's mood is brought to baseline at least sometimes by attempts to "settle" or calm.

3 = Means of alleviation never effective.

4 = Means of alleviation never employed.

PDAL157
Intensity

ABRUPT SHIFTS IN AFFECT (MOOD SWINGS)

At least once a week, child has sudden changes between extreme affect states.

Does X often suddenly change from being calm to being very agitated?

Or shift suddenly from being very happy to being very angry?

Or sad?

Or irritable?

Does s/he seem to cycle in and out of different moods during the day?

Does this happen seem to happen "out of the blue" for no reason?
How often does this happen at home?
Or at daycare/school?
Or elsewhere?

When did these shifts start?

On average, how many changes of mood (mood swings) do you see in a singe day?

ABRUPT SHIFTS IN AFFECT

0 = Absent

2 = Present

PFF2I01
Intensity

PFF2O01
Onset

/ /
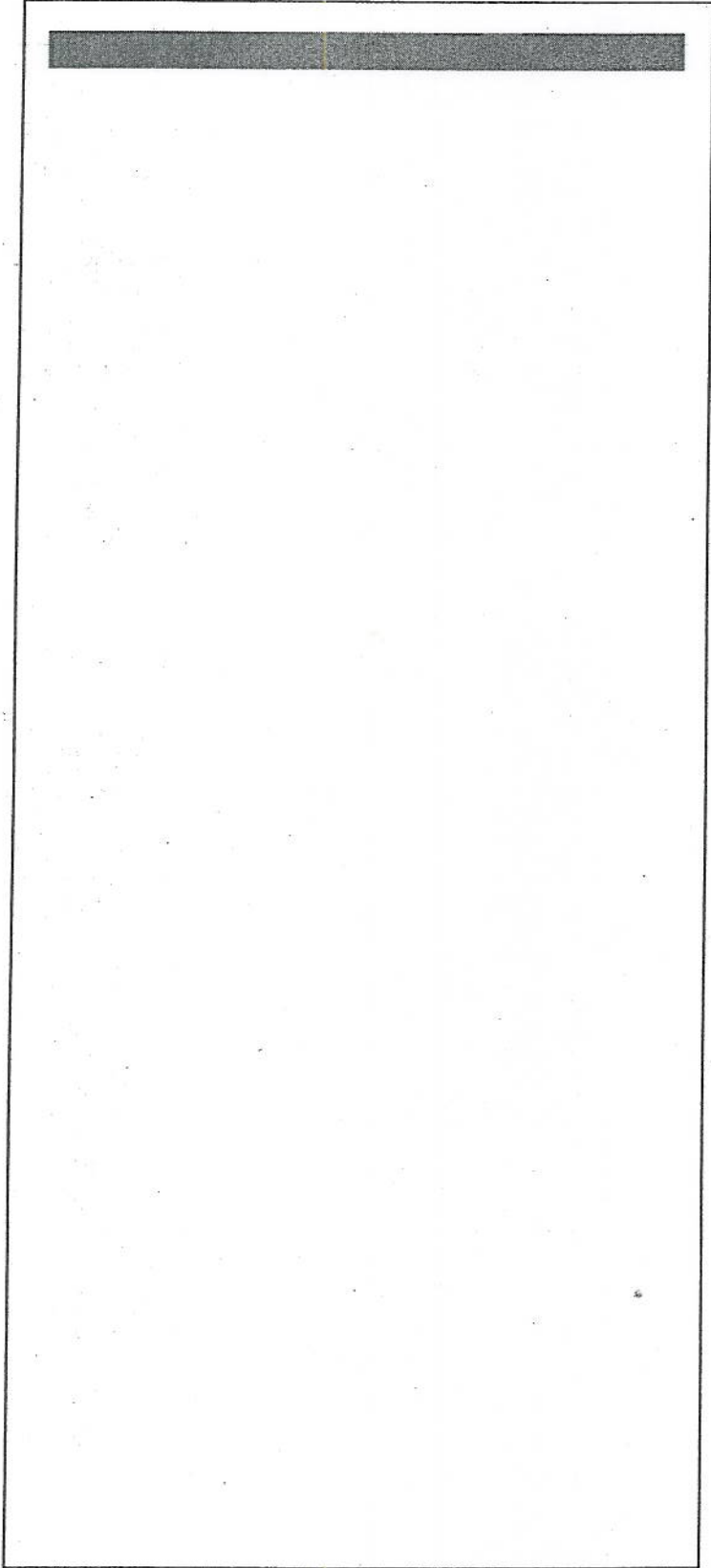
HOME

PFF2F01
Home Frequency

DAYCARE/SCHOOL

PFF2F02
Daycare/School Frequency

ELSEWHERE

PFF2F03
Elsewhere Frequency

AVERAGE NUMBER OF MOOD SHIFTS PER DAY ON DAYS WHERE PRESENT

PFF2F04

IF EVIDENCE OF EXPANSIVE MOOD, ABRUPT SHIFTS IN AFFECT, OR IRRITABILITY ARE NOT PRESENT, SKIP TO ""TEMPER TANTRUMS" IS ABSENT", (PAGE ERROR! BOOKMARK NOT DEFINED.).

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Definitions and questions

Coding rules

Codes

Hypomania and Mania

C-83

Definitions and questions	Coding rules	Codes

IRRITABILITY WITH EXPANSIVE MOOD

If both Irritability and Expansive Mood have been present together, or within the same 24 hour period, then code here.

IRRITABILITY WITH EXPANSIVE MOOD

0 = Expansive Mood not accompanied by Irritability.

2 = Expansive Mood accompanied by Irritability.

PDE4I01
Intensity

DEPRESSED MOOD WITH EXPANSIVE MOOD

Both Depressed Mood and Expansive Mood present within same 24 hour period. Either the two moods must both separately meet the criteria for each, or if the two rapidly alternate, the two taken together must last at least one continuous hour at a level that meets the other minimum criteria.

Were there times when s/he was both "really happy" and "depressed" on the same day?

Tell me about that.
Was s/he usually like that?
Or was s/he usually either one or the other?
How long did it last?

When did s/he start to get the "depression" and "feeling really happy" so close together?

Has there been a period of at least 2 months during the last year when s/he didn't have either "depressed mood" or "expansive mood?"

DEPRESSED MOOD WITH EXPANSIVE MOOD

0 = Absent

2 = Present, with both moods, either separately or together, meeting the intensity level '2' criteria.

PDE6I01
Intensity

PDE6O01
Onset
/ /

PERIOD OF 2 MONTHS WITHOUT EITHER DEPRESSED MOOD OR EXPANSIVE MOOD IN LAST YEAR

0 = Absent

2 = Present

PDE6I02

MORE TALKATIVE THAN USUAL

Child is more talkative than usual. Speech may be loud, rapid, nonstop, or difficult to interrupt during periods of Expansive, Expansive/Irritable, or Irritable Mood.

Distinguish from chattiness.

Were there times when s/he was more talkative than usual?

What was that like?
Could you interrupt him/her?

MORE TALKATIVE THAN USUAL

0 = Absent

2 = More talkative than usual, intrusive into at least two activities but retains some regard for others' wishes to communicate.

3 = More talkative in most activities with little regard for others' wishes to communicate.

PDF4I01
Intensity

PDF4O01
Onset
/ /

Definitions and questions	Coding rules	Codes

RACING THOUGHTS

A description of many images and ideas flashing through the mind or many ideas arising quickly.

Has s/he had times when s/he's had racing thoughts?

Has s/he ever said s/he has too many thoughts?

Did so many ideas come out that you could hardly keep up with them?

Has s/he ever expressed that his/her thoughts were like a traffic jam?

RACING THOUGHTS

0 = Absent

2 = Child describes periods of racing thoughts. These thoughts are intrusive into at least 2 activities.

3 = Racing thoughts occur regularly and frequently.

HOURS : MINUTES

PDAL402
Intensity

PDAL403
Frequency

PDAL404
Duration

PDAL405
Onset

/ /

PRESSURE OF SPEECH

A description of periods of talking fast, with a sensation of pressure to get words and ideas out, when in Expansive or Expansive/Irritable Mood, or Irritable Mood.

Was s/he talking very fast?

Could you get a word in edgewise?

Did it seem like s/he could not stop talking?
Did s/he rattle on, even if you tried to interrupt?
How long did that last?

When did you first notice it?

PRESSURE OF SPEECH

0 = Pressure of speech absent.

2 = Pressure of speech intrusive into normal communication in at least 2 activities; but some coherent communication possible, even if with an effort to maintain control.

3 = Pressure of speech so intrusive and uncontrollable as essentially to prevent normal communication.

PDE8I01
Intensity

PDE8O01
Onset

/ /

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Definitions and questions	Coding rules	Codes

FLIGHT OF IDEAS

A description of images and ideas flashing through the mind, when in Expansive or Expansive/Irritable Mood, or Irritable Mood.

Has s/he had times when lots of thoughts flashed through his/her head one after the other very fast?

Did s/he keep jumping from one thing to another?

Did his/her words come so fast that you could hardly keep up with them?
Could you follow what s/he was saying?
What did you think of his/her ideas at the time?
Would s/he shift topics because words rhymed with each other?
Or because one word suggested some new subject?
Could you follow his/her thoughts or did they seem confusing?
Could you do anything to slow him/her down?
How long did it last?

When did it start?

MOTOR PRESSURE

Feeling of increased physical energy or capacity expressed in motor behavior, when in Expansive or Expansive/Irritable Mood, or Irritable Mood.

Has s/he had times when s/he felt really energetic?

What did s/he do?
When s/he was feeling "super happy" or silly, did s/he do any physical activities that s/he wouldn't normally?

Was s/he rushing around all over the place?

What did you notice?
Was s/he able to do anything useful?
Or did s/he seem to be out of control?
What did you and other people think of his/her activities?
Was s/he moving faster than usual?
Could you do anything to slow him/her down?

When did this first happen to him/her?

Coding rules column:

FLIGHT OF IDEAS

0 = Flight of ideas absent.

2 = Flight of ideas intrusive into normal thinking, involving at least 2 activities, but some coherent thought processes possible, even if with effort to maintain control.

3 = Flight of ideas so intrusive as to be almost completely disruptive of normal thought.

MOTOR PRESSURE

0 = Absent

2 = Motor pressure leads to increased activity only within the child's usual range of activities involving at least 2 activities.

3 = Child actually takes up new physical activities as a result of increased motor activity.

HOURS : MINUTES

Codes column:

PDE7I01
Intensity

PDE7O01
Onset
/ /

PDE9I01
Intensity

PDE9F01
Frequency

PDE9D01
Duration

PDE9O01
Onset
/ /

Definitions and questions	Coding rules	Codes

AGITATION

Markedly changed motor activity associated with Expansive or Expansive/Irritable or Irritable Mood. Account of a severe level of inappropriate, unpleasant motor restlessness during the mood state, indicated by pacing, wringing of hands, or similar activities.

Do not include simple restlessness or fidgetiness in the absence of mood change.

Does s/he get very restless when s/he's "miserable" or super up or happy?

Does s/he have difficulty keeping still?

What is that like?
Can s/he keep him/herself still?
Does s/he have to move around?
Is s/he always like that?
Does s/he pace about?
Or wring his/her hands?
How about when s/he is not feeling "over the top" or irritable like that?

UNUSUALLY ENERGETIC

During waking hours, child is more active that usual without expected fatigue. Or child demonstrates little fatigue in spite of maintenance of normal activities.

Has s/he had more energy than usual to do things without getting tired?

Did s/he seem to go 'non-stop' without getting worn out?

Did it ever seem that s/he had too much energy?

What was s/he like then?

Coding rules column:

AGITATION

0 = Absent

2 = Agitation is present in at least 2 activities and cannot be entirely controlled, but sometimes the child can inhibit his/her agitation with effort.

3 = Agitation almost entirely uncontrollable.

HOURS : MINUTES

HOURS : MINUTES

UNUSUALLY ENERGETIC

0 = Absent

2 = Child has persistent daily periods of increased energy.

Codes column:

PDF5I01
Intensity

PDF5F01
Frequency

PDF5D01
Duration

PDF5O01
Onset
/ /

PDAL609
Duration

PDAL700
Onset
/ /

PDAL608
Frequency

PDAL607
Intensity

C- 87

Definitions and questions	Coding rules	Codes

DISTRACTIBILITY

Inability to screen out irrelevant external stimuli during the period of mood disturbance. May have difficulty keeping thoughts on themes relevant to the topic.

When s/he is feeling this way, does s/he have difficulty paying attention when s/he can look out of the window or hear other people talking in the next room?

Does s/he find him/herself easily distracted by things going on around him/her?

Like the furnishings in a room?
Or someone's tie?
Can you give me an example?
Is it like that in all activities or just some?
Can s/he stop him/herself from getting distracted?
Is that all the time or just sometimes?

DISTRACTIBILITY

0 = Absent

2 = Present in a least 2 activities and at least sometimes uncontrollable by the child.

3 = Present in most activities and at least sometimes uncontrollable by the child or by admonition.

PDF6I01
Intensity

PDF6O01
Onset
/ /

DECREASED NEED FOR SLEEP

During the period of mood disturbance, child feels adequately rested with at least 1 hour less sleep than usual per night, for at least 1 week.

Differentiate from Insomnia, where reduced sleep is associated with a feeling of being inadequately rested.

When s/he was "super happy" or silly, did s/he need as much sleep as usual?

How much sleep was s/he getting?

Was s/he on the go all the time?
Did she disturb you at night?
What did she do?

When did that start?

DECREASED NEED FOR SLEEP

0 = Absent

2 = 1-2 hours less sleep than usual per night.

3 = More than 2 hours less sleep than usual per night.

PDF0I01
Intensity

PDF0F01
Frequency

PDF0O01
Onset
/ /

Definitions and questions	Coding rules	Codes

GRANDIOSE IDEAS AND ACTIONS

An unusually increased level of self-esteem or self-appraisal of worth, such as the feeling of being superbly strong, or exceptionally able, or intelligent, when in Expansive or Expansive/Irritable Mood or Irritable Mood.

Distinguish from fantasy play unrelated to mood changes.

When s/he's "super happy" or silly, are there any times when s/he feels that s/he is a really great or marvelous person?

Such as a super-hero?
Did s/he think that s/he has special powers?
Like s/he could fly?
Or be invisible?
Did s/he think s/he was as powerful and strong as grown-ups?

What did s/he do when s/he felt like that?

When s/he thinks s/he's in charge, thinks s/he's especially talented, etc., how long does it generally last?

Does she get this way at home/school/elsewhere?

When did s/he start to feel like that about him/herself?

GRANDIOSE IDEAS AND ACTIONS

0 = Absent

2 = Ideas present but not translated into action.

3 = Ideas translated into action.

HOURS : MINUTES

HOME

DAYCARE/SCHOOL

ELSEWHERE

PDF1101
Intensity

PDAL162
Duration

PDAL159
Home
Frequency

PDAL160
Daycare/School
Frequency

PDAL161
Elsewhere
Frequency

PDF1001
Onset

/ /

IF GRANDIOSE IDEAS AND ACTIONS PRESENT, COMPLETE. OTHERWISE, SKIP TO "BRAGGING", (PAGE 13).

Definitions and questions	Coding rules	Codes

GRANDIOSE IDEAS AND ACTIONS - IN PLAY

Degree in which grandiosity is related to fantasy play.

Does s/he believe s/he had special powers, abilities only while engaged in fantasy play (pretending to be a queen, movie star, athlete, president)?

Does s/he believe s/he has special powers, abilities, etc. when not playing?

GRANDIOSE IDEAS AND ACTIONS - IDEAS TRANSLATED INTO ACTION

Degree to which ideas result in action.

Does 'X' do anything because of these beliefs (e.g., child believes s/he can fly and jumps from heights. Or child believes s/he is in charge and tells the teacher how to manage the classroom)?

What has s/he done?

GRANDIOSE IDEAS AND ACTIONS - CONCERN TO ADULTS

Are you concerned about "X's" beliefs that s/he has special powers/abilities or thinks s/he's in charge?

Do you think it is a problem?

Is anyone else concerned about "X's" beliefs that s/he has special powers/abilities or thinks s/he's in charge? Who?

Has anyone commented that about "X's" beliefs that s/he has special powers/abilities or thinks s/he's in charge? Who?

GRANDIOSITY - IN PLAY

0 = Grandiosity only evident in fantasy play.

2 = Grandiosity outside of fantasy play is evident.

PDAL164
Intensity

TRANSLATED INTO ACTION

0 = No

2 = Yes

PDAL165
Intensity

CONCERN TO ADULTS

0 = Absent

2 = Present

PDAL166
Intensity

WHO IS CONCERNED (CODE ALL THAT APPLY)

1 = Parent 1.

2 = Parent 2.

3 = Other Parent 1.

4 = Other Parent 2.

5 = Teacher/childcare provider.

6 = Other adult.

PDAL167

PDAL168

PDAL169

PDAL170

PDAL171

PDAL172

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