
THE PSYCHIATRIC REVIEW OF SYMPTOMS

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(This material is derived from *The Psychiatric Interview*, 5th ed., Daniel Carlat, Wolters Kluwer, 2023.)

Introduction

The psychiatric review of symptoms (PROS) is an important though often neglected part of the initial psychiatric evaluation. This fact sheet provides a framework to help you screen for the major psychiatric disorders that your client may have. It starts with a mnemonic that will help you recall all the major categories of disorders, followed by brief reminders of the diagnostic criteria. It's helpful to have this at your side when doing your interviews, though eventually you will memorize most of the information contained herein.

- **Overall Mnemonic for Each Major Category of DSM Diagnoses**

- **Depressed Patients Sound Anxious, So Claim Psychiatrists**

- Depression and other mood disorders (includes bipolar disorder)
- Psychotic disorders
- Substance use disorders
- Anxiety disorders (includes panic disorder, GAD, OCD, PTSD)
- Somatic disorders (includes eating disorders, somatic symptom disorder)
- Cognitive disorders (includes ADHD and dementia)
- Personality disorders

- **Specific Disorders**

- **Major depression**

- Screening question: *Are you depressed? Have you felt depressed pretty much every day over the past 2 weeks?*
- DSM criteria: **SIGECAPS**
 - Four out of the following eight, plus depressed mood, for at least 2 weeks
 - Sleep disorder (either increased or decreased sleep)
 - Interest deficit (anhedonia)
 - Guilt (worthlessness, hopelessness, regret)
 - Energy deficit
 - Concentration deficit
 - Appetite disorder (either decreased or increased appetite)
 - Psychomotor retardation or agitation
 - Suicidality

- **Manic episode**

- Screening question: *Has there been a time of several days when your mood felt great and you slept only two or three hours a night, or even less, but still had a lot of energy?*
- Mnemonic for DSM symptoms: **DIGFAST**
 - Elevated mood with three of these seven, or irritable mood with four of these seven, for 1 week:
 - Distractibility
 - Indiscretion (*DSM-5-TR's "excessive involvement in pleasurable activities..."*)

- o **Grandiosity**
- o **Flight of ideas**
- o **Activity increase**
- o **Sleep deficit (decreased need for sleep)**
- o **Talkativeness (pressured speech)**

o **Psychotic disorders**

- Screening question: *Have you had any strange or odd experiences lately that you can't explain, like seeing or hearing things that aren't there?*
- DSM Criteria: **Delusions Hasten Schizophrenic's Bad News**
 - Requires two symptoms for 1 month, plus 5 months of prodromal or residual symptoms. At least one symptom must be one of the three core symptoms (delusions, hallucinations, speech disorganization).
 - o **Delusions**
 - o **Hallucinations**
 - o **Speech/thought disorganization**
 - o **Behavior disorganization**
 - o **Negative symptoms**

o **Substance use disorder**

- Screening question: *Do you enjoy a drink or getting high now and then?*
- DSM Criteria: **Tempted With Cocaine** (Must meet at least 2 of the following 11 criteria)
 - **Tolerance**, that is, a need for increasing amounts of a substance to achieve intoxication
 - **Withdrawal syndrome**
 - **Loss of Control of substance use** (nine criteria follow):
 - o More substance ingested than the patient intended
 - o Unsuccessful attempts to cut down
 - o Much time spent in activities related to obtaining or recovering from the effects of the substance
 - o Craving the substance
 - o Substance use continued despite significant problems caused by its use
 - o Important social, occupational, or recreational activities given up or reduced because of substance use
 - o Failure to fulfill major role obligations at work school, or home
 - o Persistent social and interpersonal problems caused by substance use
 - o Recurrent substance use in situations in which it is physically hazardous

o **Panic disorder**

- Screening question: *Have you ever had a panic or anxiety attack? A panic attack is a sudden rush of fear and nervousness in which your heart pounds, you get short of breath, and you're afraid you're going to lose control or even die. Has that ever happened to you?*
- DSM Criteria: Recurrent panic attacks plus 1 month or more of worrying about the next attack.
 - **Heart, Breathlessness, Fear** (Must have at least 4 of the following 13 symptoms)
 - o **Heart cluster:** palpitations, chest pain, nausea
 - o **Breathlessness cluster:** shortness of breath, choking sensation, dizziness, paresthesias, hot/cold waves

- o Fear cluster: fear of dying, fear of going crazy, sweating, shaking, derealization/depersonalization
- o **Agoraphobia**
 - Screening question: *Have you started to avoid things because of your panic attacks? Do you have problems with crowds? Buses or subways? Restaurants? Bridges? Driving places?*
 - DSM Criteria: Anxiety about (and avoidance of) places or situations from which escape might be difficult or embarrassing.
- o **Generalized Anxiety Disorder**
 - Screening question: *Are you a worrier? What do you worry about?*
 - DSM Criteria: Excessive worry for at least 6 months, plus 3 of the following 6 symptoms:
 - Mnemonic: **Macbeth Frets Constantly Regarding Illicit Sins**
 - Muscle tension
 - Fatigue
 - Concentration difficulty
 - Restlessness or feeling on edge
 - Irritability
 - Sleep disturbance
- o **Social Anxiety Disorder**
 - Screening question: *Are you uncomfortable in social situations?*
 - DSM Criteria: Panic or near panic attack in social situations.
 - *Do you get to the point of having a panic attack?*
 - *Is this anxiety so intolerable that you would go out of your way to avoid any social situations?*
- o **Post Traumatic Stress Disorder**
 - Screening question: *Do you have posttraumatic stress disorder, which means having memories or dreams of a terrible experience, like being attacked by someone or surviving a natural disaster?*
 - DSM Criteria: **Remembers Atrocious Nuclear Attacks** (Person has all four, they last at least 1 month)
 - **Remembers:** The traumatic event is persistently **Re**-experienced via memories, dreams, flashbacks, or intense distress when the person is exposed to events that are symbolic of the original event.
 - **Atrocious:** Stimuli associated with the event are persistently **A**voided, for example, avoiding certain activities or thoughts, amnesia for the event.
 - **Nuclear:** The person experiences **N**egative cognitions and feelings, as in negative beliefs about oneself or the world, inability to have positive emotions, diminished interest in various activities, or a sense of foreshortened future.
 - **Attacks:** Increased **A**rousal occurs: sleep disturbance, irritability, difficulty concentrating, hypervigilance, exaggerated startle response.
- o **Anorexia Nervosa**
 - Screening question: *Have you ever had an eating disorder, such as anorexia or bulimia?*
 - DSM Criteria: **Weight Fear Bothers Anorexics** (all 3 criteria required)
 - **W**eight significantly low
 - Intense **F**ear of gaining weight or becoming fat

- Distorted **B**ody image
- o **Bulimia Nervosa**
 - Screening question: *Have you ever felt like your eating was out of control? Do you have eating binges when you eat a large amount of food than you should and feel like you can't stop eating?*
 - DSM Criteria: **Bulimics Over-Consume Pastries**
 - Binge eating episodes (at least once a week for 3 mo)
 - Out of control: Feeling of being out of control when bingeing
 - Concern with body shape and weight that is excessive
 - Purging behaviors, such as self-induced vomiting; misuse of laxatives, diuretics, enemas, or other medications; fasting; or excessive exercise
- o **Somatic Symptom Disorder** (formerly “somatization disorder”)
 - Screening question: *Do you tend to worry a lot about your health?*
 - DSM Criteria:
 - Patient has one or more somatic symptoms (may or may not be medically documented as “real”)
 - Overly focused on the symptom(s), as defined by one or more of the following:
 - o Excessive thoughts about the seriousness of the symptom
 - o High levels of anxiety about the symptom
 - o Too much time devoted to thinking about or responding to the symptom
- o **ADHD**
 - Screening question: *When you were in elementary or junior high school, did you have problems with hyperactivity or paying attention in class?*
 - DSM Criteria: Children should eat their **OATM** to concentrate better in class.
 - Organization problems (difficulty finishing tasks)
 - Attention problems (difficulty concentrating)
 - Talking impulsively (impulsivity)
 - Movement excess (hyperactivity)
- o **Neurocognitive Disorder (Dementia)**
 - Screening question: *Have you noticed that your memory has been getting worse over the last year or two?*
 - DSM Criteria: **Memory LAPSE** (Significant impairment in at least one of the six domains is required.)
 - Memory
 - Language
 - Attention (complex)
 - Perceptual-motor
 - Social cognition
 - Executive function
- o **Personality Disorders**—See separate fact sheet on screening for personality disorders.