C. DIFFERENTIAL DIAGNOSIS OF PSYCHOTIC DISORDERS

NOTE: BOTH PRIMARY PSYCHOTIC SYMPTOMS AND PSYCHOTIC SYMPTOMS THAT ARE SUBSTANCE-INDUCED OR DUE TO A GENERAL MEDICAL CONDITION MAY BE PRESENT IN THE SAME INDIVIDUAL AT THE SAME TIME. THIS MAY REQUIRE MULTIPLE ‘PASSES’ THROUGH THE ALGORITHMS IN THIS MODULE.

IF: ALL DELUSIONS AND HALLUCINATIONS CODED “3” IN MODULE B. ARE DUE TO A SUBSTANCE OR A GENERAL MEDICAL CONDITION, GO TO *GMC/SUBSTANCE*, C. 19, AND THEN PROCEED WITH NEXT MODULE.

IF: THERE ARE NO ITEMS CODED “3” IN B. PSYCHOTIC AND ASSOCIATED SYMPTOMS, CHECK HERE ___ AND SKIP TO NEXT MODULE.

IF A MAJOR DEPRESSIVE OR MANIC EPISODE HAS EVER BEEN PRESENT: Has there ever been a time when you had (PSYCHOTIC SXS) and you were not (DEPRESSED/MANIC)?

Psychotic symptoms occur at times other than during Major Depressive, Manic, or Mixed Episodes.

NOTE: CODE “3” IF NO MAJOR DEPRESSIVE, MANIC, OR MIXED EPISODES OR IF SOME PSYCHOTIC SYMPTOMS OCCUR OUTSIDE OF MOOD EPISODES OR IF PSYCHOTIC SXS OCCUR ONLY DURING MAJOR DEPRESSIVE EPISODES THAT LACK A (1) DEPRESSED MOOD.

CODE “1” IF PSYCHOTIC SXS OCCUR ONLY DURING MANIC, MIXED, OR MAJOR DEPRESSIVE EPISODES (WITH A [1] DEPRESSED MOOD).
SCHIZOPHRENIA CRITERIA

CHECK FOR PRESENCE OF ACTIVE PHASE SYMPTOMS.

REFER TO ITEMS CODED"3" IN THE PSYCHOTIC AND ASSOCIATED SYMPTOMS MODULE (MODULE B).

A. Two (or more) of the following, each present for a significant portion of time during a 1-month period (or less if successfully treated):

1. delusions
2. hallucinations
3. disorganized speech (e.g., frequent derailment or incoherence)
4. grossly disorganized or catatonic behavior
5. negative symptoms, i.e., affective flattening, alogia or avolition

[Note: only one A symptom is required if delusions are bizarre or hallucinations consist of a voice keeping up a running commentary on the person’s behavior or thoughts, or two or more voices conversing with each other.]

NOTE: CONSIDER A RATING OF “1” IF DELUSIONS PLUS HALLUCINATIONS CONSIST ONLY OF NON-BIZARRE DELUSIONS PLUS TACTILE AND/OR Olfactory HALLUCINATIONS (WHICH IS CONSISTENT WITH A DIAGNOSIS OF DELUSIONAL DISORDER).

?=inadequate information  1=absent or false  2=subthreshold  3=threshold or true
E. The disturbance is not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or to a general medical condition.

IF THERE IS ANY INDICATION THAT DELUSIONS OR HALLUCINATIONS MAY BE SECONDARY (I.E., A DIRECT PHYSIOLOGICAL CONSEQUENCE OF A GMC OR SUBSTANCE) GO TO "GMC/SUBST* C. 19, AND RETURN HERE TO MAKE A RATING OF “1” OR “3.”

Etiological general medical conditions include: neurological conditions (e.g., neoplasms, cerebrovascular disease, Huntington’s disease, epilepsy, auditory nerve injury, deafness, migraine, central nervous system infections); endocrine conditions (e.g., hyper- and hypothyroidism, hyper- and hypoparathyroidism, hypocortisolism); metabolic conditions (e.g., hypoxia, hypercarbia, hypoglycemia); fluid or electrolyte imbalances; hepatic or renal diseases; and autoimmune disorders with central nervous system involvement (e.g., systemic lupus erythematosis).

Etiological substances include: alcohol, amphetamine, cannabis, cocaine, hallucinogens, inhalants, opioids (meperidine), phencyclidine, sedatives, hypnotics, anxiolytics, and other or unknown substances.
**SCHIZOPHRENIFORM DISORDER**

SCHIZOPHRENIA HAS BEEN RULED OUT BECAUSE THE DURATION IS LESS THAN 6 MONTHS.

IF NOT KNOWN: How long did (PSYCHOTIC SX) last?

IF NOT KNOWN: Were you taking any drugs or medications during this time?

IF NOT KNOWN: Were you physically ill at this time?

B. An episode of the disorder (including prodromal, active and residual phases) lasts at least 1 month but less than 6 months.

C. The disturbance is not due to the direct physiological effects of a substance (e.g., a drug of abuse, medication) or to a general medical condition.

IF THERE IS ANY INDICATION THAT THE DELUSIONS OR HALLUCINATIONS MAY BE SECONDARY (I.E., A DIRECT PHYSIOLOGICAL CONSEQUENCE OF A GMC OR SUBSTANCE, GO TO *GMC/SUBST* C. 19, AND RETURN HERE TO MAKE A RATING OF “1” OR “3.”

REFER TO LIST OF GENERAL MEDICAL CONDITIONS AND SUBSTANCES, C. 5

When the diagnosis is made without waiting for recovery, it should be qualified as “provisional.”

NOTE: CODE “2” IF THE EXPECTED RECOVERY HAS NOT YET OCCURRED. CODE “3” IF THERE HAS BEEN A FULL RECOVERY.

?=inadequate information  1=absent or false  2=subthreshold  3=threshold or true
SCHIZOAFFECTIVE DISORDER

SCHIZOPHRENIA AND SCHIZOPHRENIFORM DISORDER HAVE BEEN RULED OUT BECAUSE OF PROMINENT MOOD SYMPTOMS. CONSIDER A DIAGNOSIS OF SCHIZOAFFECTIVE DISORDER.

A. An uninterrupted period of illness during which, at some time, there is either a Major Depressive Episode (which must include A(1) depressed mood), a Manic or a Mixed episode concurrent with symptoms that meet Criterion A for Schizophrenia.

CODE “3” IF MANIC, MIXED, OR MAJOR DEPRESSIVE EPISODES WITH DEPRESSED MOOD ARE CONCURRENT WITH “A” SYMPTOMS OF SCHIZOPHRENIA. CODE “1” IF THE ONLY CONCURRENT MOOD EPISODES ARE MAJOR DEPRESSIVE EPISODES WITHOUT DEPRESSED MOOD (I.E., WITH LOSS OF INTEREST ONLY).

B. During the same period of illness, there have been delusions or hallucinations for at least 2 weeks in the absence of prominent mood symptoms.

GO TO *PSYCHOTIC MOOD DISORDER NOS* C. 23

C. Symptoms that meet criteria for a mood episode are present for a substantial portion of the total duration of the active and residual periods of the illness.

GO TO TOP OF C. 4 IF MDE IS W/O DEPRESSED MOOD

GO TO TOP OF C. 22

? = inadequate information 1 = absent or false 2 = subthreshold 3 = threshold or true
IF NOT KNOWN: Were you taking any drugs or medicines during this time?

IF NOT KNOWN: Were you physically ill at this time?

D. The disturbance is not due to the direct physiological effects of a substance (e.g., a drug of abuse, medication) or to a general medical condition.

IF THERE IS ANY INDICATION THAT THE PSYCHOTIC OR MOOD SXS MAY BE SECONDARY (I.E., A DIRECT PHYSIOLOGICAL CONSEQUENCE OF A GMC OR SUBSTANCE, GO TO “GMC / SUBSTANCE,” C. 19, AND RETURN HERE TO MAKE A RATING OF “1” OR “3.”

REFER TO LIST OF GENERAL MEDICAL CONDITIONS AND SUBSTANCES ON PAGE C. 5.

SCHIZOAFFECTIVE DISORDER SUBTYPES

Bipolar Type: If the disturbance includes a Manic or Mixed Episode (or a Manic or Mixed Episode and Major Depressive Episodes)

Depressive Type: If the disturbance includes only Major Depressive Episodes.
*DELUSIONAL DISORDER*  

**DELUSIONAL DISORDER CRITERIA**

**IF:** THERE HAVE NEVER BEEN ANY DELUSIONS, CHECK HERE ____ AND SKIP TO MIDDLE OF PAGE C.17, *BRIEF PSYCHOTIC DISORDER.*

SCHIZOPHRENIA, SCHIZOPHRENIFORM, AND SCHIZOAFFECTIVE DISORDERS HAVE BEEN RULED OUT.

IF UNCLEAR: Has there ever been a time when you have been (DELUSIONAL) at the same time that you were (depressed/high/irritable/OWN WORDS)?

D. (1) There are no Major Depressive, Manic or Mixed Episodes that have occurred concurrently with delusions.

NOTE: CODE “3” IF THERE HAVE NEVER BEEN ANY MAJOR DEPRESSIVE, MANIC OR MIXED EPISODES OR IF ALL MOOD EPISODES OCCURRED AT TIMES OTHER THAN DURING DELUSIONAL PERIODS. CODE “1” IF THERE HAS BEEN A PERIOD OF OVERLAP WITH DELUSIONS.

D. (2) The total duration of all mood episodes occurring concurrently with delusions has been brief relative to the duration of the delusional periods.

NOTE: CODE “1” IF SYMPTOMS MEETING CRITERIA FOR A MOOD EPISODE ARE PRESENT FOR A SUBSTANTIAL PORTION OF THE TOTAL DURATION OF THE DISTURBANCE.

IF UNCLEAR: How much of the time that you have had (DELUSIONS) would you say you have also been (depressed/high/irritable/OWN WORDS)?

D. (2) The total duration of all mood episodes occurring concurrently with delusions has been brief relative to the duration of the delusional periods.

NOTE: CODE “1” IF SYMPTOMS MEETING CRITERIA FOR A MOOD EPISODE ARE PRESENT FOR A SUBSTANTIAL PORTION OF THE TOTAL DURATION OF THE DISTURBANCE.

IF UNCLEAR: Have you had (DELUSIONS) only at times when you were (depressed/high/OWN WORDS)?

Psychotic symptoms occur exclusively during Major Depressive, Manic, and Mixed Episodes.

?=inadequate information  
1=absent or false  
2=subthreshold  
3=threshold or true
IF NOT KNOWN: Were you taking any drugs or medicines during this time?

IF NOT KNOWN: Were you physically ill at this time?

C. (2) The disturbance is not due to the direct physiological effects of a substance (drugs of abuse, medication) or to a general medical condition.

IF ANY INDICATION THAT DELUSIONS OR HALLUCINATIONS ARE SECONDARY (I.E., A DIRECT PHYSIO-LOGICAL CONSEQUENCE OF GMC OR SUBST) GO TO *GMC / SUBST,* C. 19, AND RETURN HERE TO MAKE A RATING OF “1” OR “3.”

REFER TO LIST ON PAGE C. 5

B. Duration of an episode of the disturbance is at least 1 day, but less than 1 month, with an eventual full return to premorbid level of functioning.

C. (1) Not better accounted for by a Mood Disorder (i.e., no full mood episode is present).

NOTE: CODE “3” IF NO MOOD EPISODES.

Symptoms occur shortly after and apparently in response to events that, singly or together, would be markedly stressful to almost anyone in similar circumstances in the person’s culture.

DESCRIBE STRESSOR:

NOTE: CHECK HERE IF ONSET WITHIN 4 WEEKS POSTPARTUM

DUE TO GMC/SUB IF OTHER PERIODS OF PSYCHOTIC SXS NOT DUE TO A SUBSTANCE OR GMC RETURN TO C. 1; OTHERWISE GO TO CHRONOLOGY C. 24

GO TO *PSYCHOTIC DISORDER NOS* C. 23

GO TO *PSYCHOTIC NOS* C. 23

GO TO NEXT MODULE

BRIEF PSYCHOTIC DISORDER

GO TO *PSYCHOTIC DISORDER NOS* C. 23

GO TO NEXT MODULE

BRIEF PSYCHOTIC DISORDER

GO TO "CHRONOLOGY" C. 24

?=inadequate information 1=absent or false 2=subthreshold 3=threshold or true
**GMC/SUBSTANCE CAUSING PSYCHOTIC SYMPTOMS**

<table>
<thead>
<tr>
<th>PSYCHOTIC DISORDER DUE TO A GENERAL MEDICAL CONDITION</th>
<th>PSYCHOTIC DISORDER DUE TO A GENERAL MEDICAL CONDITION CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>IF SYMPTOMS NOT TEMPORALLY ASSOCIATED WITH A GENERAL MEDICAL CONDITION, CHECK HERE ___ AND GO TO <em>SUBSTANCE-INDUCED PSYCHOTIC DISORDER,</em> C. 21.</td>
<td>C40a</td>
</tr>
</tbody>
</table>

CODE BASED ON INFORMATION ALREADY OBTAINED

<table>
<thead>
<tr>
<th>A. Prominent hallucinations or delusions</th>
<th>?</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>GO TO <em>SUBSTANCE-INDUCED</em> C. 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you think your (DELUSIONS/HALLUCINATIONS) were in any way related to your (COMORBID GENERAL MEDICAL CONDITION)?

IF YES: Tell me how.

B./C. There is evidence from the history, physical examination, or laboratory findings that the disturbance is the direct physiological consequence of a general medical condition and the disturbance is not better accounted for by another mental disorder.

<table>
<thead>
<tr>
<th>THE FOLLOWING FACTORS SHOULD BE CONSIDERED AND SUPPORT THE CONCLUSION THAT THE GMC IS ETIOLOGIC TO THE PSYCHOTIC SYMPTOMS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) THERE IS EVIDENCE FROM THE LITERATURE OF A WELL-ESTABLISHED ASSOCIATION BETWEEN THE GMC AND PSYCHOTIC SYMPTOMS.</td>
</tr>
<tr>
<td>2) THERE IS A CLOSE TEMPORAL RELATIONSHIP BETWEEN THE COURSE OF THE PSYCHOTIC SYMPTOMS AND THE COURSE OF THE GENERAL MEDICAL CONDITION.</td>
</tr>
<tr>
<td>3) THE PSYCHOTIC SYMPTOMS ARE CHARACTERIZED BY UNUSUAL PRESENTING FEATURES (E.G., LATE AGE AT ONSET).</td>
</tr>
<tr>
<td>4) THERE IS NO ALTERNATIVE EXPLANATION (PSYCHOTIC SYMPTOMS AS A PSYCHOLOGICAL REACTION TO THE GMC).</td>
</tr>
</tbody>
</table>

GO TO *SUBSTANCE-INDUCED* C. 21
SUBSTANCE-INDUCED PSYCHOTIC DISORDER

IF SYMPTOMS NOT TEMPORALLY ASSOCIATED WITH SUBSTANCE USE, CHECK HERE ___ AND RETURN TO DISORDER BEING EVALUATED (OR ELSE GO TO NEXT MODULE IF SKIPPED HERE FROM PAGE C.1 BECAUSE ALL PSYCHOTIC SYMPTOMS IN B WERE DUE TO SUBSTANCE OR GMC)

CODE BASED ON INFORMATION ALREADY OBTAINED.

A. Prominent hallucinations or delusions. Note: Do not include hallucinations if the person has insight that they are substance-induced.

B. There is evidence from the history, physical examination, or laboratory findings that either (1) the symptoms in A developed during, or within a month of, Substance Intoxication or Withdrawal, or (2) medication use is etiologically related to the disturbance.

IF NOT KNOWN: When did the (DELUSIONS/HALLUCINATIONS) begin? Were you already using (SUBSTANCE) or had you just stopped or cut down on its use?

Do you think your (DELUSIONS/HALLUCINATIONS) were in any way related to your (SUBSTANCE USE)?

IF YES: Tell me how.

ASK ANY OF THE FOLLOWING QUESTIONS AS NEEDED TO RULE OUT A NON-SUBSTANCE-INDUCED ETIOLOGY.

IF UNKNOWN: Which came first, the (SUBSTANCE USE) or the (PSYCHOTIC SXS)?

IF UNKNOWN: Have you had a period of time when you stopped using (SUBSTANCE)?

? = inadequate information 1 = absent or false 2 = subthreshold 3 = threshold or true

DISORDER BEING EVALUATED:
Schizophrenia C. 5
Schizotypal C. 11
Schizoaffective C. 14
Delusional C. 16
Brief Psychotic C. 18

RETURN TO DISORDER BEING EVALUATED (OR NEXT MODULE IF SKIPPED HERE FROM C.1)

RETURN TO DISORDER BEING EVALUATED (OR NEXT MODULE IF SKIPPED HERE FROM C.1)

RETURN TO DISORDER BEING EVALUATED (OR NEXT MODULE IF SKIPPED HERE FROM C.1)
IF YES: After you stopped using (SUBSTANCE) did the (DELUSION / HALLUCINATIONS) get better or were you still (DELUSIONAL / HAVING HALLUCINATIONS)?

IF UNKNOWN: How much of (SUBSTANCE) were you taking when you began to have (DELUSIONS/HALLUCINATIONS)?

IF UNKNOWN: Have you had any other episodes of (DELUSIONS/ HALLUCINATIONS)?

IF YES: How many? (Were you taking (SUBSTANCES) at those times?)

3) the psychotic symptoms are substantially in excess of what would be expected given the type or amount of the substance used or the duration of use

4) there is evidence suggesting the existence of an independent non-substance-induced Psychotic Disorder (e.g., a history of recurrent non-substance-related psychotic episodes)

CRITERION A, B, AND C ARE MET.

RETURN TO DISORDER BEING EVALUATED (OR ELSE GO TO NEXT MODULE IF SKIPPED HERE FROM PAGE C.1 BECAUSE ALL PSYCHOTIC SYMPTOMS IN B WERE DUE TO SUBSTANCE OR GMC)