

MENTAL STATUS EXAM

Date: _____ Client Name: _____ Age: _____ Sex: _____ Ethnicity: _____

Partner Status _____ Occupation _____ Sexual Orientation _____

Number of children _____ Living Circumstances _____

GENERAL			
Appearance			
<i>Hygiene</i>	Average	Unclean	Body odor – Unusual
<i>Clothing-Grooming</i>	Average, Appropriate	Unkempt, Disheveled	Atypical
<i>Physical Characteristics</i>	Weight: Average, ↑, ↓	Health: Good, Frail	Unusual
	Unique marks (tattoos)	Body type-build	Physical Disabilities
General Behavior & Mood			
<i>Eye contact:</i>	Yes – Appropriate	Sometimes	No Inappropriate: staring
<i>Posture:</i>	Relaxed	Slumped	Rigid
<i>Motor Activity</i>	Agitated, Fidgety Restless, Pacing,	Decreased, Slowed. Psychomotor retardation	Unusual: Tics, Tremors mannerisms, gestures
<i>Facial Expression</i>	Fear, Anxious	Sadness, Depression	Unusual, Atypical
	Anger, Hostile	Joy, Reflective	Absence of feelings
<i>Speech Volume</i>	Appropriate, Audible	Soft, Mute,	Loud
<i>Speech Rate</i>	Appropriate, Controlled	Rapid, Pressured, Slow	Deliberate, Monotonous
<i>Speech Quantity</i>	Appropriate, Concise	Monosyllables. Minimal	Detailed, Elaborate
<i>Speech Quality</i>	Appropriate, Clear	Stutters, Slurred, Mumble,	Impediments – ESL
<i>State of Consciousness</i>	Alert	Lethargic, Drowsy, Stupor	Unresponsive. Even to pain
<i>Attitude Towards Interviewer</i>	Cooperative, Open Genuine. Attentive	Control, Domineering	Oppositional/ Provocative Hostile
	Overly Compliant	Suspicious, Guarded	Resistant, Evasive
Clinical Narrative Re General Example: “Mrs. Andrews appears older than her stated age of 50, she is considerably overweight, and was dressed in a soiled sleeveless dress that seemed inappropriate for the cold, rainy weather. Her hair appeared dirty and tousled. Though cooperative with the interviewer, she sat tensely in her chair, avoided eye contact unless addresses directly, and wrung her hands throughout most of the interview.”			

FEELINGS			
<i>Predominate Mood: How do you feel most of the time?</i>	Reflective	Euphoric	Elevated
	Depressed, Dysthemic	Angry	Irritable, anxious
<i>Affect: How is mood expressed?</i>	Broad and appropriate	Restricted, limited range	Blunted
	Flat	Inappropriate	Labile, tearful, crying
<i>Appropriateness to Thought Content</i>	Mostly congruent	Sometimes congruent	Not congruent
<i>Mood and Affect Word Vocabulary:</i> Euphoric, elated, frivolous, buoyant, jovial, light-hearted, cheerful, placid, sober, serious, solemn, grave, gloomy, brooding, disconsolate, hopeless, terrified, panicky, agitated, tremulous, apprehensive, tense, fretful, uneasy, composed, calm, non-chalant, unconcerned, cool, bland, stoic, self-condemning, self-reproachful, remorseful, ashamed, regretful, concerned, indifferent, unfeeling, unreformed, derogatory, scornful, argumentative, critical, outspoken, frank, tactful, soft-spoken, complimentary, flattering, assaultive, assertive, hesitant, passive, tender, sympathetic, kindly, considerate, unresponsive, detached, unfeeling, hardened, rejecting, agreeable, reserved, bashful, reticent, withdrawn, excitable, abrupt, restless, eager, satisfied, restrained, indifferent, listless, lethargic, persistent.			

PERCEPTION (OF SENSORY INFORMATION)			
<i>Hallucinations (no stimulus is present). Do you hear voices when no one is around</i>	None	Auditory: Do you hear? Do you follow the voices?	Visual: Do you see?
	Olfactory: r/o brain tumor or disturbance.	Gustatory. Do you have unexplained sensations	No Data
<i>Illusions (misperceived stimulus)</i>	None	Present	No Data
<i>Derealization: Sense of detachment from one's world/environment.</i>	None	Present	No Data
<i>Depersonalization: Sense of detachment from one's sense of self. Often an experience of anxiety.</i>	None	Present	No Data
Astereognosis	Identifies by touch	Does not identify object	No Data
APRAXIA: Difficulty carrying out purposeful voluntary movement sequences for speech in the at paralysis of the speech musculature.			
THOUGHT PROCESSES			
Stream of Thoughts			
<i>Productivity</i>	Average	Overabundance	Paucity
	Spontaneous	Needs prompting	Mixed
<i>Continuity</i>	Goal Directed, Logical Perceptive	Relevant – Irrelevant to question asked	Loose associations, Rambling
	Peseveration of thoughts	Effort to go from thought to thought	Tangential,
	Blocking, Vacant stare	Flight of ideas	Circumstantial
<i>Language and Speech impairment:</i>	Neologisms (makes up new words)	Word Salad (in-comprehensible speech)	Clang association (meaningless word rhymes)
	Anomia: Cannot name objects recognize spoken objects	Apraxia: Difficulty in carrying out sequential speech	Echolalia (word echoing) Incoherent
	Aphasia: Impairment of language, affecting the production or comprehension of speech and the ability to read or write. Aphasia is always due to injury to the brain-most commonly from a stroke.		
Content Of Thoughts			
<i>Preoccupation</i>	Obsessions Compulsions	Phobias. Paranoia. Persecution	Suicidal thoughts Wanting to harm self.
	Somatic concerns: Intrusive worries about disease or defects.	Repetitive thoughts-worry	Aggressive or homicidal thoughts. Wanting to harm others.
<i>Thought Disturbances</i>	Delusions: false beliefs: Do you have thoughts that other people think would be strange?	Ideas of reference: Those behaviors of others refer to oneself. (The person in the TV is talking to me)	Thought broadcasting
	Magical thinking	Confabulation	Grandiosity
	Jealousy	Religious	Thought insertion by others
<i>Executive Function</i>	Abstract thinking	Concrete thinking	No Data
<i>Information processing, intelligence and Formal and Informal Education</i>	Fund of knowledge: <input type="checkbox"/> High <input type="checkbox"/> Average <input type="checkbox"/> Low	Vocabulary: <input type="checkbox"/> High <input type="checkbox"/> Average <input type="checkbox"/> Low	Self-expression: <input type="checkbox"/> High <input type="checkbox"/> Average <input type="checkbox"/> Low
	Completed: Grades 1-12	BA, MA, PHD.	Informal:
<i>Attention</i>	Average	Distractible	Hyper vigilant
<i>Concentration*</i>	Average	Brief	Non
*Example count back from 100 in increments of 7 or back from 20 in increments of 3 and so forth.			

ORIENTATION (x3, x 4)			
Oriented to Time Do you know the time? Y / N	Oriented to Person Do you know your name? Y / N	Oriented to Place Do you know where you are? Y / N	Oriented to circumstances Do you know why you are here? Y / N
MEMORY			
<i>Immediate Memory: Past few hours or minutes</i>	Average	Below Average	No Data
<i>Recent memory: Recent past or day/month</i>	Average	Below average	No Data
<i>Remote Memory: Childhood or past HX</i>	Average	Below average	No Data
IMPLUSE CONTROL			
<i>Control of Impulses. Do you think before acting or do you act before thinking? History of</i>	Hostile- aggressive impulses Y/ N	Sexual impulses Y/ N	No Data
JUDGMENT/SOCIAL JUDGMENT			
<i>Does the individual notice proper behavior. Moral development. Questions such as if you found a wallet and so forth....</i>	Good Average	Poor None	No Data
INSIGHT			
<i>The degree of self- awareness of oneself and one awareness</i>	Good. Full acceptance and awareness of self and responsibilities	Average. Some acceptance and some denial.	Poor. Denial and blames other
RELIABILITY OF REPORT			
<i>Is the person a good self historian?</i>	Good	Fair	Poor
OTHER COMMENTS			

Therapist Signature: _____ **Date:** _____

References

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Grwoth- Marnat G. (2003). *Handbook of Psychological Assessment*. Hoboken, New Jersey: John Wiley & Sons, Inc.

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