

**\*PAIN DISORDER\*  
(CURRENT ONLY)**

**PAIN DISORDER CRITERIA**

IF NOT ALREADY KNOWN: Have you been to see a doctor because of physical pain?

A. Pain in one or more anatomical sites is the predominant focus of the clinical presentation and is of sufficient severity to warrant clinical attention.

? 1 2 3

GO TO  
\*UNDIFFER-  
ENTIATED\*  
G.7

G43

(How much does the pain interfere with your life?) (Has it made it hard to do your work, or be with friends?)

B. The pain causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

? 1 2 3

GO TO  
\*UNDIFFER-  
ENTIATED\*  
G.7

G44

What was going on in your life when this pain began?

C. Psychological factors are judged to have an important role in the onset, severity, exacerbation, or maintenance of the pain.

? 1 2 3

GO TO  
\*UNDIFFER-  
ENTIATED\*  
G.7

G45

(Have the doctors told you that your pain is more than you should be having?)

D. The symptom or deficit is not intentionally produced or feigned (as in Factitious Disorder or Malingering).

? 1 2 3

GO TO  
\*UNDIFFER-  
ENTIATED\*  
G.7

G46

(Does your pain get worse when you are feeling upset or stressed out?)

E. The pain is not better accounted for by a Mood, Anxiety or Psychotic Disorder and does not meet criteria for Dyspareunia (i.e., pain during sexual intercourse).

? 1 3

GO TO  
\*UNDIFFER-  
ENTIATED\*  
G.7

G47

CRITERIA A, B, C, D, AND E, ARE CODED "3."

1 3

CONTINUE ON NEXT PAGE    PAIN DISORDER

G47a

IF UNKNOWN: How old were you when you first started having (SXS OF PAIN)?

Age at onset of Pain Disorder (CODE 99 IF UNKNOWN)

\_\_\_\_\_

G48

Indicate Type:

G49

- 1 **Pain Disorder Associated with Psychological Factors:** psychological factors are judged to have the major role in the onset, severity, exacerbation, or maintenance of the pain. (If a general medical condition is present, it does not have a major role in the onset, severity, exacerbation, or maintenance of the pain.) This type of Pain Disorder is not diagnosed if criteria are also met for Somatization Disorder.
- 2 **Pain Disorder Associated With Both Psychological Factors and a General Medical Condition:** both psychological factors and a general medical condition are judged to have important roles in the onset, severity, exacerbation, or maintenance of the pain.

CONTINUE ON NEXT PAGE

**\*UNDIFFERENTIATED SOMATOFORM DISORDER\* (CURRENT ONLY)**

**UNDIFFERENTIATED SOMATOFORM DISORDER CRITERIA**

IF: SOMATIZATION DISORDER (G. 5)  
OR PAIN DISORDER (G. 6),  
CHECK HERE \_\_\_ AND SKIP TO **\*HYPOCHONDRIASIS,\*** G. 9.

G50

INFORMATION OBTAINED FROM OVERVIEW OF PRESENT ILLNESS AND SCREENING QUESTIONS AT THE BEGINNING OF THIS MODULE WILL USUALLY BE SUFFICIENT TO CODE THIS ITEM. ASK ADDITIONAL QUESTIONS IF NECESSARY.

A. One or more physical complaints, e.g., fatigue, loss of appetite, gastrointestinal or urinary complaints

? 1 2 3

G51

DESCRIBE:

GO TO  
**\*HYPOCHONDRIASIS,\***  
G. 9

FOR EACH SYMPTOM REPORTED, DETERMINE THAT THE CRITERIAN IS MET BY SUCH QUESTIONS AS:

B. Either (1) or (2):

? 1 2 3

G52

Did you tell a doctor about (SYMPTOM)?

(1) after appropriate investigation, the symptoms cannot be explained by a known general medical condition or the direct effects of a substance (e.g., drugs of abuse, medication)

What was the diagnosis? (What did the doctor say was causing it?)

Was anything abnormal found on tests or x-rays?

Were you taking any medications, drugs, or alcohol around the time you were having (SYMPTOM)?

IF A RELATED GENERAL MEDICAL CONDITION: How much trouble have (PHYSICAL SYMPTOMS) caused you?

(2) when there is a related general medical condition, the physical complaints or resulting social or occupational impairment is in excess of what would be expected from the history, physical examination, or laboratory findings

? 1 2 3

G53

IF NEITHER  
ITEM (1)  
NOR (2) IS  
CODED "3"  
GO TO  
**\*HYPOCHONDRIASIS,\***  
G. 9

**\*HYPOCHONDRIASIS\*  
(CURRENT ONLY)**

**HYPOCHONDRIASIS CRITERIA**

Do you worry a lot that you have a serious disease that the doctors have not been able to diagnose?

A. Preoccupation with fears of having, or the idea that one has, a serious disease, based on the person's misinterpretation of bodily symptoms.

? 1 2 3

G60

What makes you think so? (What do you think you have?)

DESCRIBE:

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G. 10

What have your doctors told you?

B. The preoccupation persists despite appropriate medical evaluation and reassurance.

? 1 2 3

G61

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G. 10

C. The belief in A is not of delusional intensity (as in Delusional Disorder, Somatic Type) and is not restricted to a circumscribed concern about appearance (as in Body Dysmorphic Disorder).

? 1 2 3

G62

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G. 10

IF NOT ALREADY KNOWN: How much have these concerns interfered with your life? (Has it made it hard for you to do your work or be with friends?)

D. The preoccupation causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

? 1 2 3

G63

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G. 10

(When did all this begin?)

E. Duration of the disturbance is at least 6 months.

? 1 2 3

G64

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G. 10

Age at onset (CODE 99 IF UNKNOWN)

\_\_\_

G65

F. The preoccupation is not better accounted for by Generalized Anxiety Disorder, Obsessive Compulsive Disorder, Panic Disorder, a Major Depressive Episode, Separation Anxiety, or another Somatoform Disorder.

? 1 3

G66

GO TO \*BODY  
DYSMORPHIC  
DISORDER\*  
G.10

HYPOCHONDRIASIS CRITERIA A, B, C, D, E, AND F ARE CODED "3."

1 3

G67

HYPOCHON-  
DRIASIS

NOTE: RECODE CRITERION E IN UNDIFFERENTIATED SOMATOFORM DISORDER (G. 8) IF NECESSARY.

CONTINUE ON  
NEXT PAGE

**BODY DYSMORPHIC DISORDER  
(CURRENT ONLY)**

**BODY DYSMORPHIC DISORDER  
CRITERIA**

IF DID NOT ACKNOWLEDGE CONCERNS ABOUT APPEARANCE ON G. 1, CHECK HERE \_\_\_ AND SKIP TO THE NEXT MODULE.

G67a

You've said that you have been bothered by (DEFECT IN APPEARANCE). How often do you think about it?

(Think about a typical day. In all, about how much do you think about [DEFECT]? For example, at least an hour a day?)

A. Preoccupation with an imagined defect in appearance. If a slight physical anomaly is present, the person's concern is markedly excessive.

? 1 2 3

G68

GO TO  
NEXT  
MODULE

NOTE: CODE "3" ONLY IF CLEARLY IMAGINED OR EXAGGERATED.

IF UNCLEAR: How much does this bother you? What effect has this had on your life? (Has it made it hard for you to do your work or be with friends?)

B. The preoccupation causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

? 1 2 3

G69

GO TO  
NEXT  
MODULE

C. The preoccupation is not better accounted for by another mental disorder (e.g., dissatisfaction with body shape and size in Anorexia Nervosa).

? 1 3

G70

GO TO  
NEXT  
MODULE

CRITERIA A, B, AND C ARE CODED "3."

1 3

G71

GO TO  
NEXT  
MODULE

BODY  
DYSMOR-  
PHIC  
DISORDER

IF UNKNOWN: How old were you when you first started having (SXS OF BDD)?

Age at onset of Body Dysmorphic Disorder (CODE 99 IF UNKNOWN)

\_\_\_ \_\_\_

G72

GO TO NEXT MODULE