The items in this section indicate whether or not the consumer has a psychiatric disorder in addition to a developmental disability. A psychiatric disorder is a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual, which is associated with present distress (e.g., a painful symptom), disability (i.e., impairment in one or more important areas of functioning) or with a significantly increased risk of death, pain, disability, or an important loss of freedom. In addition, this syndrome or pattern must not be merely an expected and culturally sanctioned response to a particular event, for example, the death of a loved one. Whatever the original cause, it must currently be considered a manifestation of a behavioral, psychological, or biological dysfunction in the individual. Neither deviant behavior (e.g., political, religious, or sexual) nor conflicts primarily between the individual and society are psychiatric disorders, unless the deviance or conflict is a symptom of dysfunction in the individual, as described above.

Complete this section only if a diagnosis of a psychiatric disorder has been made by a psychologist, psychiatrist, or by other qualified persons trained to diagnose psychiatric disorders (e.g., physicians, Licensed Clinical Social Workers).

Although Autistic Disorder, Asperger Disorder, and Pervasive Developmental Disorder, NOS, are classified as psychiatric disorders, these disorders should not be coded here. If the consumer has a diagnosis of Autistic Disorder, Asperger Disorder, or Pervasive Developmental Disorder NOS, it should be addressed in the Autistic Disorder section rather than here. Likewise, Rett Syndrome and Childhood Disintegrative Disorder are not recorded in this section. Instead, these disorders are to be recorded under the Mental Retardation and Epilepsy Sections as appropriate.
TYPE OF PSYCHIATRIC DISORDER (Items 50a, 51a, 52a, and 53a)
These items indicate the types of psychiatric disorders the consumer may have, as set forth in Diagnostic and Statistical Manual of Mental Disorders Fourth Edition, Text Revision (DSM-IV-TR).

Information for consumers with a developmental disability and a psychiatric disorder (“dual diagnosis”) is to be recorded in both the applicable Developmental Disabilities Section and the Psychiatric Disorders Section. However, do not record consumers' developmental disability diagnosis (e.g., mental retardation) in the Psychiatric Disorders Section. As the developmental disability information has been recorded in the Developmental Disabilities Section, only those specific psychiatric disorders that meet the criteria set forth in DSM-IV-TR are to be recorded in this section.

When rating the consumer:
- This section should be used to record psychiatric disorders only when the consumer's record indicates he or she has been evaluated by a qualified professional who has determined, in writing, that the consumer has a psychiatric disorder and who has provided a diagnosis of that disorder. Undiagnosed “behavior problems” do not constitute a valid diagnosis.

- Use the diagnostic codes and names for the psychiatric disorder as specified in the DSM-IV-TR.

- Only Axis I and Axis II conditions, if applicable, are to be recorded in this section. The consumer may have disorders in both axes.
  - Axis I comprises the entire classification of psychiatric disorders as well as conditions not attributable to psychiatric disorders that are an important focus for treatment.
• Axis II involves personality disorders and mental retardation.

• If two diagnoses are made on either Axis, code the most significant condition requiring treatment as the first diagnostic code within the Axis.

• If the diagnosis is deferred on either Axis I or Axis II, code as “799.9.”

  Psychiatric disorder diagnoses are not to be deferred for longer than one year.

• If there is a diagnosis for Axis I but no Axis II diagnosis, enter the appropriate DSM-IV-TR code under Axis I and enter code “V71.09” under Axis II. Conversely, if there is an Axis II diagnosis but no Axis I diagnosis, code Axis I as “V71.09” and code the appropriate DSM-IV-TR diagnosis under Axis II. Other codes beginning with a “V” will rarely be the most appropriate code.

DATE OF LAST EVALUATION (Items 50b, 51b, 52b, and 53b)

Date of Last Evaluation is the date on which the consumer was most recently assessed as having the psychiatric disorder(s) coded under items 50a—53a. If the date is unknown, or is illegible, use the pseudo date of 01/01/1800 to complete this item.

CONDITION IMPACT (Items 50c, 51c, 52c, and 53c)

Condition Impact refers to the extent or degree to which the diagnosed psychiatric disorder affects the level of supervision/care required and/or the program placement of the consumer. Enter the appropriate code, as shown below, in one of the spaces provided.

Condition Impact Definitions

None: No evidence of impairment.

Mild: Condition requires some special attention when planning for the consumer’s placement and/or some extra supervision/care.

Moderate: Condition has a major impact upon the ability to obtain an appropriate
placement for the consumer and/or requires a considerable amount of supervision/care.

**Severe:** Condition is so substantial that it is exceedingly difficult to find an appropriate placement for the consumer and/or constant supervision/care is required.

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**Completing the Hard-Copy CDER Form**

Type of Psychiatric Disorder, Date of Last Evaluation, and Condition Impact (Items 50a – 53a, 50b – 53b, and 50c – 53c)

**Type of Psychiatric Disorder (Items 50a – 53a):**

- If the consumer has a psychiatric disorder(s), enter the appropriate DSM-IV-TR code and complete the respective “b” (Date of Last Evaluation) and “c” (Condition Impact) items for the particular psychiatric disorder recorded in the “a” (Axis column). In other words, if an entry has been made in 50a and 52a, then Items 50b and 50c, and Items 52b and 52c must also be completed.

- If the consumer has no diagnosis of a psychiatric disorder, leave Item 50a, and all other all other items in the Psychiatric Disorder section, blank.

**Date of Last Evaluation (Items 50b –53b):**

- If the consumer has no psychiatric disorder, this item should be left blank.

- If the consumer has a psychiatric disorder but the date is not in the consumer's records, or is otherwise not available, enter the pseudo-date of 01/01/1800.
Completing the Hard-Copy CDER Form for Psychiatric Disorders

(Continued)

**Condition Impact (Items 50c – 53c):**

Users of the hard-copy form should enter the appropriate code, based on the above definitions, in Items 50c, 51c, 52c and 53c as applicable. The codes are as follows:

**Condition Impact Codes:**

0  No Evidence of Impairment
1  Mild
2  Moderate
3  Severe

**When Coding Condition Impact:**

- If the consumer has no psychiatric disorder, these items should be left blank.
- If the consumer has a psychiatric disorder, but it does not have an affect upon supervision/care and/or program placement, enter code “0” (“No Evidence of Impairment”).

(See examples below for completing Type of Psychiatric Disorder, Date of Last Evaluation and Condition Impact)
EXAMPLES OF CODING TYPE OF PSYCHIATRIC DISORDER, DATE OF LAST EVALUATION AND CONDITION IMPACT

Example 1: Following is an example of coding for a person with an adjustment disorder with mixed anxiety and depressed mood where a moderate level of supervision is necessary. Additionally, the person has a personality disorder not otherwise specified with minimal impact to the amount of supervision required. The date of last evaluation for the diagnoses on both axes is January 1, 2004.

<table>
<thead>
<tr>
<th>Type of Psychiatric Disorder</th>
<th>Axis I</th>
<th>Date of Last Evaluation</th>
<th>Condition Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>50a. 3 0 9 2 8</td>
<td>50b. 0 1 0 1 0 4</td>
<td>50c. 2</td>
<td></td>
</tr>
<tr>
<td>51a. 1 1 1</td>
<td>51b. 1 1 1 1 1</td>
<td>51c. 1</td>
<td></td>
</tr>
<tr>
<td>52a. 3 0 1</td>
<td>52b. 0 1 0 1 0 4</td>
<td>52c. 1</td>
<td></td>
</tr>
<tr>
<td>53a. 1 1 1</td>
<td>53b. 1 1 1 1</td>
<td>53c. 1</td>
<td></td>
</tr>
</tbody>
</table>
**Example 2:** This example represents a consumer with the same personality disorder as the one above where minimal supervision is required, but he/she does not have a psychiatric disorder under Axis I. The date of last evaluation for the Axis II diagnosis is January 1, 2004.

<table>
<thead>
<tr>
<th>Type of Psychiatric Disorder</th>
<th>Axis I</th>
<th>Date of Last Evaluation</th>
<th>Condition Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>V 7 1 0 9</td>
<td>50b.</td>
<td>50c.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>51a.</td>
<td>51b.</td>
<td>51c.</td>
</tr>
<tr>
<td>3 0 1 9 4</td>
<td>52b.</td>
<td>52c.</td>
<td>1</td>
</tr>
<tr>
<td>53a.</td>
<td>53b.</td>
<td>53c.</td>
<td></td>
</tr>
</tbody>
</table>

*Completing the Hard-Copy CDER Form Example 2*
Example 3: This example involves a person with an obsessive-compulsive disorder with moderate condition impact and a bipolar disorder with mild condition impact. The records show that this consumer was diagnosed as having borderline and paranoid personality disorders, both having an impact requiring moderate supervision. The date of last evaluation for the diagnoses on both axes is January 1, 2004.

Completing the Hard-Copy CDER Form Example 3:

<table>
<thead>
<tr>
<th>Type of Psychiatric Disorder</th>
<th>Axis I</th>
<th>Date of Last Evaluation</th>
<th>Condition Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>50a.</td>
<td>3 0 0 1</td>
<td>3</td>
<td>50b. 0 1 0 1 0 4</td>
</tr>
<tr>
<td>51a.</td>
<td>2 9 6 8</td>
<td>51b. 0 1 0 1 0 4</td>
<td>51c. 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Axis II</th>
<th>Date of Last Evaluation</th>
<th>Condition Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>52a.</td>
<td>3 0 1 8 3</td>
<td>52b. 0 1 0 1 0 4</td>
</tr>
<tr>
<td>53a.</td>
<td>3 0 1 0</td>
<td>53b. 0 1 0 1 0 4</td>
</tr>
</tbody>
</table>