

The APA is offering a number of “emerging measures” for further research and clinical evaluation. These patient assessment measures were developed to be administered at the initial patient interview and to monitor treatment progress. They should be used in research and evaluation as potentially useful tools to enhance clinical decision-making and not as the sole basis for making a clinical diagnosis. Instructions, scoring information, and interpretation guidelines are provided; further background information can be found in DSM-5. The APA requests that clinicians and researchers provide further data on the instruments’ usefulness in characterizing patient status and improving patient care at <http://www.dsm5.org/Pages/Feedback-Form.aspx>.

**Measure:** Clinician-Rated Severity of Conduct Disorder

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# CLINICIAN-RATED SEVERITY OF

## CONDUCT DISORDER

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Sex:  Male  Female

Date: \_\_\_\_\_

### Instructions:

This clinician-rated severity measure is used for the assessment of the presence and severity of any CONDUCT DISORDER problems.

Based on all the information you have on the individual receiving care and using your clinical judgment, please rate (✓) the presence and severity of the conduct problems as experienced by the individual **in the past seven (7) days**.

	Level 0	Level 1	Level 2	Level 3
Rate the level or severity of the conduct problems that are present for this individual.	<input type="checkbox"/> <b>None</b> (No conduct problems)	<input type="checkbox"/> <b>Mild</b> (Few if any conduct problems in excess of those required to make the diagnosis are present, and conduct problems cause relatively minor harm to others [e.g., lying, truancy, staying out after dark without permission, or other rule breaking])	<input type="checkbox"/> <b>Moderate</b> (The number of conduct problems and the effect on others are intermediate between "mild" and "severe" [e.g., stealing without confronting a victim, vandalism])	<input type="checkbox"/> <b>Severe</b> (Many conduct problems in excess of those required to make the diagnosis are present, or conduct problems cause considerable harm to others [e.g., forced sex, physical cruelty, use of a weapon, stealing while confronting a victim, breaking and entering])

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### Instructions to Clinicians

The Clinician-Rated Severity of Conduct Disorder assesses the severity of the CONDUCT problems that are present for the individual based on the number of problems and their harm to others. The measure is intended to capture meaningful variation in the severity of symptoms, which may help with treatment planning and prognostic decision-making. The measure is completed by the clinician at the time of the clinical assessment. The clinician is asked to rate the severity of the conduct disorder behavior as experienced by the individual in the past seven days.

### Scoring and Interpretation

The Clinician-Rated Severity of Conduct Disorder is rated on a 4-point scale (Level 0=None; 1=Mild; 2=Moderate; and 3=Severe). The clinician is asked to review all available information for the individual and, based on his or her clinical judgment, select (✓) the level that most accurately describes the severity of the individual's condition.

### Frequency of Use

To track changes in the individual's symptom severity over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the individual's symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the individual that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.