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-TR. 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: DSM-5-TR Self-Rated Level 1 Cross-Cutting Symptom Measure—

Child Age 11–17

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DSM-5-TR Self-Rated Level 1 Cross-Cutting Symptom Measure—Child Age 11–17

Name:	Age: Date:
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Instructions: The questions below ask about things that might have bothered you. For each question, circle the number that best describes how much (or how often) you have been bothered by each problem during the **past TWO (2) WEEKS.**

I. 1. E 2. V II. 3. E U III. 4. E d IV. 5. H 6. F V. & 7. F VI. 8. F	Been bothered by stomachaches, headaches, or other aches and pains? Worried about your health or about getting sick? Been bothered by not being able to fall asleep or stay asleep, or by waking up too early? Been bothered by not being able to pay attention when you were in class or doing homework or reading a book or playing a game?	0 0 0	or two 1 1	2	days 3	day 4	(clinician)			
2. V 3. E U U 1 U 5. F U 5. F V 4. E C U U U U U U U U U	Worried about your health or about getting sick? Been bothered by not being able to fall asleep or stay asleep, or by waking up too early? Been bothered by not being able to pay attention when you were in class or	0	1			4				
II. 3. E 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Been bothered by not being able to fall asleep or stay asleep, or by waking up too early? Been bothered by not being able to pay attention when you were in class or			2						
III. 4. E d d d d d d d d d d d d d d d d d d	up too early? Been bothered by not being able to pay attention when you were in class or	0	1							
1V. 5. H 6. F V. & 7. F VI. 8. F			1	2	3 4					
6. F V. & 7. F VI. 8. F	doing from every of reduing a book of playing a game.	0	1							
V. & 7. F VI. 8. F	Had less fun doing things than you used to?	0 1 2 3 4								
VI. 8. F	Felt sad or depressed for several hours?	or depressed for several hours? 0 1 2 3 4								
	t more irritated or easily annoyed than usual? 0 1 2 3 4									
	Felt angry or lost your temper?	0	1	2	3	4				
VII. 9. S	Started lots more projects than usual or done more risky things than usual?	0	1	2	3	4				
10. S	Slept less than usual but still had a lot of energy?	0	1	2	3	4				
VIII. 11. F	Felt nervous, anxious, or scared?	0 1 2 3 4								
12. N	Not been able to stop worrying? 0 1 2 3		3	4						
1 1 1 1	Not been able to do things you wanted to or should have done, because they made you feel nervous? 0 1 2 3 4									
1 1 1 1 1	Heard voices—when there was no one there—speaking about you or telling you what to do or saying bad things to you?	0	1 2 3			4				
1 115 1	Had visions when you were completely awake—that is, seen something or someone that no one else could see?	0	1	2	3	4				
16. s	Had thoughts that kept coming into your mind that you would do something bad or that something bad would happen to you or to someone else?	0	1	2	3	4				
	Felt the need to check on certain things over and over again, like whether a door was locked or whether the stove was turned off?	a 0 1 2 3 4		4						
IIXI	Worried a lot about things you touched being dirty or having germs or being poisoned?	It things you touched being dirty or having germs or being 0 1 2 3		4						
	Felt you had to do things in a certain way, like counting or saying special things, to keep something bad from happening?					4				
In the	In the past TWO (2) WEEKS, have you									
XI. 20. I	Had an alcoholic beverage (beer, wine, liquor, etc.)?	[☐ Yes ☐ No		V O					
21. 9	Smoked a cigarette, a cigar, or pipe, or used snuff or chewing tobacco?	I	☐ Yes		□ No					
22. l	Used drugs like marijuana, cocaine or crack, club drugs (like Ecstasy), hallucinogens (like LSD), heroin, inhalants or solvents (like glue), or methamphetamine (like speed)?	[□ Yes □ No			No				
23. t	Used any medicine without a doctor's prescription to get high or change the way you feel (e.g., painkillers [like Vicodin], stimulants [like Ritalin or Adderall], sedatives or tranquilizers [like sleeping pills or Valium], or steroids)?	☐ Yes ☐ No			No					
1 1/4	In the last 2 weeks, have you thought about killing yourself or committing suicide?	☐ Yes ☐ No								
25. H	Have you EVER tried to kill yourself?		□ Yes			No				

Instructions to Clinicians

The DSM-5-TR Level 1 Cross-Cutting Symptom Measure is a self-rated measure that assesses mental health domains that are important across psychiatric diagnoses. It is intended to help clinicians identify additional areas of inquiry that may have significant impact on the child's treatment and prognosis. In addition, the measure may be used to track changes in the child's symptom presentation over time.

This child-rated version of the measure consists of 25 questions that assess 12 psychiatric domains, including depression, anger, irritability, mania, anxiety, somatic symptoms, inattention, suicidal ideation/attempt, psychosis, sleep disturbance, repetitive thoughts and behaviors, and substance use. Each item asks the child, age 11–17, to rate how much (or how often) he or she has been bothered by the specific symptom during the past 2 weeks. The measure was found to be clinically useful and had good test-retest reliability in the DSM-5 Field Trials conducted in pediatric clinical samples across the United States.

Scoring and Interpretation

Nineteen of the 25 items on the measure are each rated on a 5-point scale (0=none or not at all; 1=slight or rare, less than a day or two; 2=mild or several days; 3=moderate or more than half the days; and 4=severe or nearly every day). The suicidal ideation, suicide attempt, and substance abuse items are each rated on a "Yes or No" scale. The score on each item within a domain should be reviewed. Because additional inquiry is based on the highest score on any item within a domain, the clinician is asked to indicate that score in the "Highest Domain Score" column. Table 1 (below) outlines threshold scores that may be used to guide further inquiry for the domains. With the exception of inattention and psychosis, a rating of mild (i.e., 2) or greater on any item within a domain that is scored on the 5-point scale may serve as a guide for additional inquiry and follow-up to determine if a more detailed assessment for that domain is needed. The DSM-5-TR Level 2 Cross-Cutting Symptom measures listed in Table 1 may be used as a resource to provide more detailed information on the symptoms associated with some of the Level 1 domains.

Frequency of Use

To track change in the child's symptom presentation over time, it is recommended that the measure be completed at regular intervals as clinically indicated, depending on the stability of the child's symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic symptoms for the child that might warrant further assessment, treatment, and follow-up. Clinical judgment should guide decision making.

Table 1: DSM-5-TR Self-Rated Level 1 Cross-Cutting Symptom Measure—Child Age 11–17: domains, thresholds for further inquiry, and associated Level 2 measures

Domain	Domain Name	Threshold to guide	DSM-5-TR Level 2 Cross-Cutting Symptom Measure available online
		further inquiry	
I.	Somatic Symptoms	Mild or greater	LEVEL 2—Somatic Symptom—Child Age 11–17 (Patient Health Questionnaire
			Somatic Symptom Severity [PHQ-15])
II.	Sleep Problems	Mild or greater	LEVEL 2—Sleep Disturbance—Child Age 11-17 (PROMIS—Sleep Disturbance—
			Short Form) ¹
III.	Inattention	Slight or greater	None
IV.	Depression	Mild or greater	LEVEL 2—Depression—Child Age 11–17 (PROMIS Emotional Distress—
			Depression—Pediatric Item Bank)
V.	Anger	Mild or greater	LEVEL 2—Anger—Child Age 11–17 (PROMIS Emotional Distress—Calibrated
			Anger Measure—Pediatric)
VI.	Irritability	Mild or greater	LEVEL 2—Irritability—Child Age 11–17 (Affective Reactivity Index [ARI])
VII.	Mania	Mild or greater	LEVEL 2—Mania—Child Age 11–17 (Altman Self-Rating Mania Scale [ASRM])
VIII.	Anxiety	Mild or greater	LEVEL 2—Anxiety—Child Age 11–17 (PROMIS Emotional Distress—Anxiety—
			Pediatric Item Bank)
IX.	Psychosis	Slight or greater	None
X.	Repetitive Thoughts	Mild or greater	LEVEL 2—Repetitive Thoughts and Behaviors—Child 11–17 (adapted from the
	& Behaviors		Children's Florida Obsessive-Compulsive Inventory [C-FOCI] Severity Scale)
XI.	Substance Use	Yes/	LEVEL 2—Substance Use—Child Age 11–17 (adapted from the NIDA-modified
		Don't Know	ASSIST)
XII.	Suicidal Ideation/	Yes/	None
	Suicide Attempts	Don't Know	

¹Not validated for children by the PROMIS group but found to have acceptable test-retest reliability with child informants in the DSM-5 Field Trial.