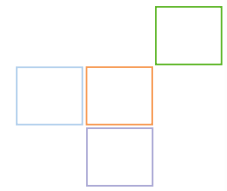


The CAT-Psychosis battery script for raters

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Instructions to Rater

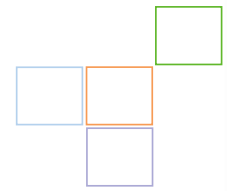
The CAT-Psychosis clinician-assessed battery is a dynamic instrument that uses computational algorithms to automatically match interviewees with only the most relevant questions for them, substantially reducing the length of the assessment. The assessment is administered using a computer tablet.

Due to the varying nature of the questions to be rated, a structured script would be of little help. Therefore, this script is intended to serve as a semi-structured guideline for consultation and assistance when a certain symptom needs to be explored. Here we include a suggested introduction, as well as a script to explore the most frequent psychiatric symptoms that might need to be assessed. Some of the questions prompted by the software might not have a script. Do not feel limited to the questions on this form or obligated to ask the questions exactly as written. Please make sure to ask additional questions that you feel will help you determine the appropriate score for the item determined by the software. The CAT assessment battery refers to the past two weeks.

Introduction

“We will be spending a few minutes talking about the past two weeks while I complete an assessment on this (*tablet, cell phone, computer...*). The purpose of this conversation is for me to get an idea about how you have been feeling over the past two weeks, and what has happened to you.

Do you have any questions before we start?”



Initial overview

“Great, let’s begin. First, I would like you to tell me, in general terms, how have you been feeling in the past two weeks, what have you been up to and what has happened to you?”

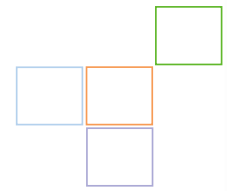
Please use this initial question to engage in a brief conversation to assess concentration difficulties, conceptual disorganization and formal thought and language disorders, as questions about these areas may appear during the assessment. Please also pay special attention to the subject’s affective expression and emotional involvement during the interview, which may be evaluated as well. Take relevant notes in the space below if needed.

Notes:

START THE COMPUTERIZED ASSESSMENT NOW

From this point onward, questions will appear on the screen and the rater will need to explore and rate them as they appear. The order and content of the questions will vary in each assessment. To quickly locate the suggested script for each symptom, please refer to the index below.

Hallucinations	page 3
Grandiose Delusions	page 4
Suspiciousness and Persecutory Delusions	page 5
Guilt Delusions	page 6
Somatic Delusions	page 7
Delusions of Reference and Unusual Thought Content.	page 8
Passive/Apathetic Social Withdrawal.	page 9



Hallucinations

“In the past two weeks, have you had any unusual or strange experiences? Have you heard sounds or voices that other people could not hear, or when there was no one around? Have you had visions or seen things that other people could not see? Did you have any strange or unusual feelings or sensations in your body? Did you smell or taste things that were unusual or different?”

If not endorsed, rate accordingly and continue to next question.

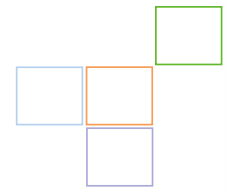
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Grandiose delusions

“Would you say that you are better than the average person? Do you feel special, unique, or superior in any way? Are you a particularly important person, very wealthy, rich, or famous? Do you have any special talents, powers, or abilities that others cannot match? Do you think there is a special role, purpose or mission specifically for you?”

If not endorsed, rate accordingly and continue to next question.

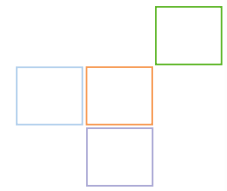
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Suspiciousness and persecutory delusions

“Do you think anybody might be talking about you behind your back, or trying to give you a hard time, annoying you or accusing you of things? Do you feel that you have to be generally on guard? Do you think that anyone could be trying to spy on you or plot against you? Do you feel sometimes that you are being followed?”

If not endorsed, rate accordingly and continue to next question.

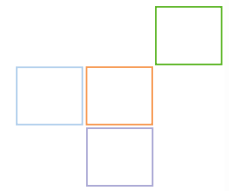
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Guilt delusions

“Have you been feeling bad or guilty about anything lately, or perhaps blaming yourself for anything? Even if it is not your fault? Do you feel you may deserve some sort of punishment for that or for any other things?”

If not endorsed, rate accordingly and continue to next question.

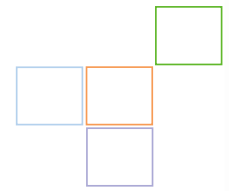
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Somatic delusions

“In the past two weeks, have you felt physically ill in any way? Or maybe noticed any unusual things about your body? Have you been concerned about being sick or that anything was wrong with your body?”

If not endorsed, rate accordingly and continue to next question.

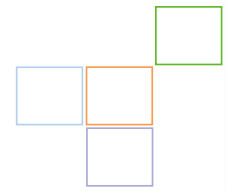
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Delusions of reference and unusual thought content

“Do certain things have a special meaning just for you? Have you received messages telepathically? Have you felt the people on the radio or television were talking to you or about you? Can you read other people’s minds? Can anyone read your mind? Is there anything controlling your thoughts or movements? Have you felt that your thoughts were somehow spread to other people or have you felt that your thoughts were taken out of your mind, or put into your mind?”

If not endorsed, rate accordingly and continue to next question.

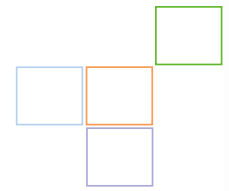
If endorsed, please explore:

Frequency: “In the past two weeks, how often have you (*name symptom*)?”

Consequences: “What do you make of it? How has this affected you? Have you done something because of (*name symptom*) that you otherwise would not have done?”

Rate accordingly.

Notes:



Passive/Apathetic social withdrawal

“Do you have friends? Do you feel close to them? How often do you contact them? How do you like to spend your free time? Do you like to spend time with others? In the past two weeks, have you participated in any social activities? What was your role in initiating such activities, or did others initiate?”

If not endorsed, rate accordingly and continue to next question.

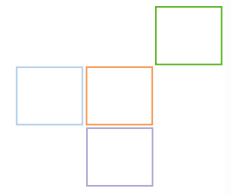
If endorsed, please rate accordingly.

Notes:

Closure

“I have no more questions. Thank you very much for your time.”

END OF ASSESSMENT.



References

Axelrod BN, Goldman RS, Alphas LD. Validation of the 16-item Negative Symptom Assessment. *J Psychiatr Res.* 1993 Jul-Sep;27(3):253-8

Kay SR, Fiszbein A, Opler LA. The positive and negative syndrome scale (PANSS) for schizophrenia. *Schizophr Bull.* 1987;13:261-276.

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Overall JE, Gorham DR. The Brief Psychiatric Rating Scale. *Psychol Rep* 1962;10:799-812.