

Mental Status Exams

A mental status examination (MSE) is an assessment of a patient's level of cognitive (knowledge-related) ability, appearance, emotional mood, and speech and thought patterns at the time of evaluation. It is one part of a full neurological (nervous system) examination and includes the examiner's observations about the patient's attitude and cooperativeness as well as the patient's answers to specific questions.

Appearance. The examiner notes the person's age, race, sex, civil status, and overall appearance. These features are significant because poor personal hygiene or grooming may reflect a loss of interest in self-care or physical inability to bathe or dress oneself.

Movement and behavior. The examiner observes the person's gait (manner of walking), posture, coordination, eye contact, facial expressions, and similar behaviors. Problems with walking or coordination may reflect a disorder of the central nervous system.

Affect. Affect refers to a person's outwardly observable emotional reactions. It may include either a lack of emotional response to an event or an overreaction.

A patient's affect is defined in the following terms: expansive (cheerfully contagious), euthymic (normal), constricted (limited variation), blunted (minimal variation), and flat (no variation).

Mood. Mood refers to the underlying emotional "atmosphere" or tone of the person's answers.

Speech. The examiner evaluates the volume of the person's voice, the rate or speed of speech, the length of answers to questions, the appropriateness and clarity of the answers, and similar characteristics.

Thought content. The examiner assesses what the patient is saying for indications of hallucinations, delusions, obsessions, symptoms of dissociation, or thoughts of suicide or harm to others.

Dissociation refers to the splitting-off of certain memories or mental processes from conscious awareness. Dissociative symptoms include feelings of unreality, depersonalization, and confusion about one's identity.

Types of hallucinations include auditory (hearing things), visual (seeing things), gustatory (tasting things), tactile (feeling sensations), and olfactory (smelling things). Command hallucinations are auditory and instruct the patient to take some action, often harmful to self or others.

Delusions include grandiose (delusions of grandeur), religious (delusions of special status with God), persecution (belief that someone wants to cause them harm), erotomanic (belief that someone famous is in love with them), jealousy (belief that everyone wants what they have), thought insertion (belief that someone is putting ideas

or thoughts into their mind), and ideas of reference (belief that everything refers to specifically to them, such as messages from the TV or radio).

Thought process. Thought process refers to the logical connections between thoughts and their relevance to the main thread of conversation. Irrelevant detail, repeated words and phrases, interrupted thinking (thought blocking), and loose, illogical connections between thoughts, may be signs of a thought disorder.

The process of thoughts can be described with the following terms: looseness of association (irrelevance), flight of ideas (change topics), racing (rapid thoughts), tangential (departure from topic with no return), circumstantial (being vague, ie, "beating around the bush"), word salad (nonsensical responses, ie, jabberwocky), derailment (extreme irrelevance), neologism (creating new words), clanging (rhyming words), punning (talking in riddles), thought blocking (speech is halted), and poverty (limited content).

Cognition. Cognition refers to the act or condition of knowing. The evaluation assesses the person's orientation (ability to locate himself or herself) with regard to time, place, and personal identity; long- and short-term memory; ability to perform simple arithmetic (counting backward by threes or sevens); general intellectual level or fund of knowledge (identifying the last five Presidents, or similar questions); ability to think abstractly (explaining a proverb); ability to name specified objects and read or write complete sentences; ability to understand and perform a task (showing the examiner how to comb one's hair or throw a ball); ability to draw a simple map or copy a design or geometrical figure; ability to distinguish between right and left.

Judgment. The examiner asks the person what he or she would do about a commonsense problem, such as running out of a prescription medication.

Insight. Insight refers to a person's ability to recognize a problem and understand its nature and severity.

Other Common Terms and Abbreviations

Activities of Daily Living (ADL's). Self-care activities such as feeding one's self, bathing, dressing, grooming) work, homemaking, and leisure.

Anhedonia. Loss of interest in pleasurable activities.

Chief Complaint (CC). Usually in quotation marks, the reason the patient gives for the evaluation. Presenting problem.

Drug of Choice (DOC). Preferred drug (including alcohol) used in an addiction.

History of Present Illness (HPI). Description of the onset of the set of signs and symptoms that comprise the current problem.

Neuro-vegetative symptoms. Alterations in sleep, appetite, and energy.

Obsessive-compulsive disorder (OCD). A disorder characterized by obsessive thoughts and compulsive actions, such as cleaning, checking, counting, or hoarding.

Orientation. Awareness of surroundings, including self, place, time, and situation/event. Often abbreviated, “O x 3” or “O x 4”, or AO x3 (alert, and oriented to person/place/time).

Phobias. Fears that cause avoidance of certain situations, panic and other anxiety symptoms.

Post-Traumatic Stress Disorder (PTSD). A disorder characterized by nightmares, flashbacks, difficulty sleeping, and feelings of detachment, usually occurring after experiencing or witnessing threatening events such as combat, natural disasters, serious accidents, or physical or sexual assaults.

“Serial 7’s”. Exercise which tests for concentration and attention span, asking for the patient to subtract 7 from 100, and then to repeat from the response.

Serious and Persistent Mental Illness (SPMI).