

# BFCRS Module Pre-Survey (A)

## Bizarre Behaviors: Please match the exam finding to the Bush-Francis Catatonia Rating Scale (BFCRS) item.

	Impulsivity	Automatic Obedience	Mitgehen	Ambitendency	Other
1) A patient being examined in the hallway suddenly starts removing their clothes for no reason.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2) When asked to tap on a desk three times, the patient taps ten times.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3) When asked to keep their arms outstretched and resist upward movement, the patient's arms easily rise with slight upward pressure from the examiner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4) The patient is calmly sitting in a chair and then spontaneously slaps a passerby in an unprovoked fashion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5) A patient appears unable to pass through a doorway, taking a half-step in and then out, in and then out.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) When asked to raise their hands above their head, the patient immediately raises both hands above their head as high as they can reach.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7) As an arm is passively extended, the resistance/muscle tone increases throughout the range of movement proportional to the applied force such that the arm cannot be fully extended.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Progress

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**According to the BFCRS, decide whether the following are examples of 'mutism'.**

- 8) Reduction in the quantity of speech.  Yes  
 No
- 
- 9) Fluent, comprehensible whispering.  Yes  
 No
- 
- 10) Whispering that is unintelligible.  Yes  
 No
- 
- 11) Refusing to answer questions, though patient answers the phone when it rings.  Yes  
 No
- 
- 12) A patient with Broca's (non-fluent) aphasia barely speaks during the interview.  Yes  
 No
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**Verbal Findings: Please match the exam finding to the BFCRS finding.**

	Echolalia	Mannerism	Verbigeration	Perseveration	Other
13) Repeating the exact statement over and over like a broken record (e.g. "I'm done, I'm done, I'm done").	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14) An odd statement that would be bizarre in any context (e.g. "I it took though night.").	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15) Speaking with an odd accent that the patient would not ordinarily have.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16) When asked a series of questions, the patient gives the address of where he lives as the answer to all of them, even when this was only the correct answer to the first question.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17) Repeating the last words or full phrases of what has just been said by the examiner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18) The patient repeatedly returns to the topic of wanting to call her boyfriend throughout the exam despite be told she can call in ten minutes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**According to the BFCRS, decide whether the following are examples of 'combateness'.**

- 19) A patient spontaneously jumps out of bed and runs out of the room and incidentally bumps into the examiner while running out.  Yes  
 No
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- 20) A patient is sitting in the dining room and then spontaneously takes his fork and sticks it in the hand of the person sitting next to him. When asked why he did it, he explains that his neighbor has been teasing him.  Yes  
 No
- 
- 21) A patient who punches a window and breaks it.  Yes  
 No
- 
- 22) A patient standing at the nursing station throws a cup of hot coffee directly at a nurse. When asked why they did it, they say, "I wasn't thirsty."  Yes  
 No
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**Muscle Tone: Please match the exam finding to the BFCRS item.**

	Posturing	Catalepsy	Rigidity	Waxy Flexibility	Gegenhalten	Other
23) Attempts to open a patient's eyes are met with resistance: the eyes cannot be opened.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24) Keeping arms raised above one's head in a bizarre fashion after being positioned by examiner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25) Passive movement of a patient's arm is initially met with resistance/stiffness but then quickly releases to allow the examiner to move the arm.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26) Attempts to move a patient's arm are met with increased tone throughout the whole range of motion, such that the passive movement feels like bending stiff clay.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27) As an arm is passively extended, the resistance/muscle tone increases in proportion to the applied force throughout the range of movement such that the arm cannot be fully extended.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28) Maintaining an odd position without movement, but not against gravity (i.e. lying angled in the bed).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29) Upon assisting the patient to sit up or turn to the side, the trunk remains stiff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30) Maintaining a mundane position (e.g. sitting for a sustained period of time at a table with arms resting on table).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31) A patient initially allows passive full range of movement of his arm, but then the arm becomes stiff and no further movement is possible despite asking the patient to relax it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Progress

**Abnormal Movements: Please match the exam finding to the BFCRS item.**

	Excitement	Grimacing	Stereotypy	Mannerism	Perseveration	Other
32) After a handshake, the patient continues shaking their hand in the air after the examiner has let go of the patient's hand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33) Body rocking while sitting with hands resting on lap.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34) Repeated scrunching of the nose	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35) Repeatedly making the motion of swimming while walking down the hall.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36) Repeated puckering of the lips.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37) Repeatedly walking up and down the hall with normal gait.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38) Repeatedly patting one's chin.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39) Tip-toeing down the hallway instead of walking.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40) Clearly exaggerated blinking or eye opening.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**According to the BFCRS, decide whether the following are examples of 'autonomic abnormality'.**

- 41) A patient with chronic hypertension is hypertensive.  Yes  
 No
- 
- 42) A patient is found to be febrile and tachypneic and is found on chest XR to have lobar pneumonia.  Yes  
 No
- 
- 43) A patient is acutely bradycardic and hypotensive.  Yes  
 No
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**Minimal Engagement: Please match the exam finding to the BFCRS item.**

	Immobility/Stupor	Staring	Withdrawal	Negativism	Other
44) The patient has a fixed, vacant gaze away from the examiner, but even when the examiner moves into the patient's line of sight, it appears the patient is looking past the examiner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45) A patient who has spontaneously held their hands over their head for the past 10 minutes will not lower them when asked to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46) The patient has not eaten for over 24 hours despite being able to get up and use the bathroom.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47) The patient who has not initiated attempts to move or eat in over 24 hours begins to eat when staff feed them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48) A patient who has not looked at the examiner throughout the exam looks away when the examiner steps in their line of sight. They do not comply with the examiner's instruction to "Look at me."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49) A patient who has been lying motionless in bed throughout the interview will not raise their hand when the examiner says, "Shake my hand."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50) A patient's eyes remain tightly shut in response to manual attempts to open them by the examiner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**Test Patient: Please score the patient's catatonia symptoms using the BFCRS (below).**

Assessment Patient

- 
- 51) Excitement
- Absent
  - Excessive motion, intermittent
  - Constant motion, hyperkinetic without rest periods
  - Full-blown catatonic excitement, endless frenzied motor activity
- 
- 52) Immobility/Stupor
- Absent
  - Sits abnormally still, may interact briefly
  - Virtually no interaction with external world
  - Stuporous, non-reactive to painful stimuli
- 
- 53) Mutism
- Absent
  - Verbally unresponsive to majority of questions; incomprehensible whisper
  - Speaks less than 20 words/5 minutes
  - No speech
- 
- 54) Staring
- Absent
  - Poor eye contact, repeatedly gazes less than 20 sec between shifting of attention; decreased blinking
  - Gaze held longer than 20 sec, occasionally shifts attention.
  - Fixed gaze, non-reactive.
- 
- 55) Posturing/ Catalepsy
- Absent
  - Less than one minute
  - Greater than one minute, less than 15 minutes
  - Bizarre posture, or mundane maintained more than 15 min
- 
- 56) Grimacing
- Absent
  - Less than 10 sec
  - Less than 1 min
  - Bizarre expression(s) or maintained more than 1 min
- 
- 57) Echopraxia/ Echolalia
- Absent
  - Occasional
  - Frequent
  - Constant
- 
- 58) Stereotypy
- Absent
  - Occasional
  - Frequent
  - Constant
- 
- 59) Mannerisms
- Absent
  - Occasional
  - Frequent
  - Constant
- 
- 60) Verbigeration
- Absent
  - Occasional
  - Frequent, difficult to interrupt
  - Constant

- 
- 61) Rigidity  Absent  
 Mild resistance  
 Moderate  
 Severe, cannot be repostured
- 
- 62) Negativism  Absent  
 Mild resistance and/or occasionally contrary  
 Moderate resistance and/or frequently contrary  
 Severe resistance and/or continually contrary
- 
- 63) Waxy Flexibility  Absent  
 Present
- 
- 64) Withdrawal  Absent  
 Minimal PO intake/ interaction for less than one day  
 Minimal PO intake/ interaction for more than one day  
 No PO intake/interaction for one day or more
- 
- 65) Impulsivity  Absent  
 Occasional  
 Frequent  
 Constant or not redirectable
- 
- 66) Automatic Obedience  Absent  
 Occasional  
 Frequent  
 Constant
- 
- 67) Mitgehen  Absent  
 Present
- 
- 68) Gegenhalten  Absent  
 Present
- 
- 69) Ambitendency  Absent  
 Present
- 
- 70) Grasp Reflex  Absent  
 Present
- 
- 71) Perseveration  Absent  
 Present
- 
- 72) Combativeness  Absent  
 Occasionally strikes out, low potential for injury  
 Frequently strikes out, moderate potential for injury  
 Serious danger to others
- 
- 73) Autonomic Abnormality  Absent  
 Abnormality of one parameter [exclude pre-existing hypertension]  
 Abnormality of 2 parameters  
 Abnormality of 3 or greater parameter
-