## **BFCRS Module Pre-Survey (B)**

	Impulsivity	Automatic Obedience	Mitgehen	Ambitendency	Other
A patient spontaneously starts singing at the top of their lungs.	0	0	0	$\circ$	0
When asked to copy a square on a piece of paper, they keep tracing over their lines over and over.	0	0	0	0	0
When asked to keep their arms outstretched and resist upward movement, the patient's arms easily rise with slight upward pressure from the examiner.	0	0	0	0	0
A patient is standing at the nurse's station and spontaneously kicks the patient standing next to them.	0	0	0	0	0
A patient keeps raising their fork to their mouth to eat, but they do not put the food in their mouth.	0	0	0	0	0
When asked to sit down, the patient hurriedly sits down.	0	0	0	0	0
As an arm is passively extended the resistance increases throughout the range of movement such that the arm cannot be fully extended.	0	0	0	0	0

	According to the BFCRS, decide whether the follow	wing are examples of 'mutism'.
3)	Speaking fewer than five words per minute during the course of the interview.	<ul><li>Yes</li><li>No</li></ul>
9)	Whispering that is intelligible.	<ul><li>Yes</li><li>No</li></ul>
LO)	Speaking so softly that words are unintelligible.	<ul><li>Yes</li><li>No</li></ul>
l1)	The patient talks to themselves yet does not respond to any questions during the interview.	○ Yes ○ No
L2)	A patient with autism who is nonverbal barely speaks during the interview.	○ Yes ○ No

	<b>Verbal Findings: Please matc</b>	natch the exam finding to the BFCRS finding.		g.		
13)	Repeating the exact expression over and over like a broken record (e.g. "What time is it? What time is it? What time is it?").	Echolalia	Mannerism	Verbigeration	Perseveration	Other
14)	A patient who speaks in words that rhyme (e.g. "It's time, here's a dime, I'm fine, Sunshine").	0	0	0	0	0
15)	Speaking with a much deeper tone of voice than the patient ordinarily uses.	0	0	0	0	0
16)	When asked a series of questions, the patient gives his dog's name as the answer to all of them, even when this was only the correct answer to the first question.	0	0	0	0	0
17)	Repeating what the examiner says.	0	0	0	0	0
18)	The patient repeatedly returns to the topic of wanting a coloring book even though they are told they can have it after the exam is complete.	0	0	0	0	0

	According to the BFCRS, decide whether the fo	llowing are examples of 'combativeness'.
19)	A patient takes off his shirt, whirls it around his head, and incidentally hits the examiner.	○ Yes ○ No
20)	A patient watching TV in the common space shouts, "Shut up!" and throws the remote control at another patient who has been talking loudly.	○ Yes ○ No
21)	A patient throws a chair through a window.	○ Yes ○ No
22)	As the examiner is checking a patient's muscle tone, the patient kicks him in the shins. When asked why, they say, "I don't know."	

Attempts to open a patient's jaw	Posturing	Catalepsy	Rigidity	Waxy	Caganhaltan	
Attempts to open a patient's jaw			g.u.cy	Flexibility	Gegenhalten	Other
are met with resistance, yet the patient talks freely during the rest of the evaluation.	0	0	0	0	0	0
A sitting patient keeps their legs raised off the ground after being positioned by the examiner.	0	0	0	0	0	0
Passive extension of a patient's leg is initially met with resistance/stiffness but then quickly releases to allow the examiner to move the leg.	0	0	0	0	0	0
Attempts to move a patient's leg are met with increased tone throughout the whole range of motion, such that the passive movement feels like bending stiff clay.	0	0	0	0	0	0
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.	0	0	0	0	0	0
Lying back in a chair awkwardly but not against gravity (e.g. leg draped over one arm of the armchair).	0	0	0	0	0	0
A patient's neck is fixed and cannot be turned.	$\circ$	0	0	0	0	$\circ$
Leaning against a wall for an hour.	0	0	0	0	0	$\circ$
A patient initially allows passive full range of movement of his leg, but then the leg becomes stiff and no further movement is possible despite asking the patient to relax it.	0	0	0	0	0	0
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	<b>Abnormal Movements: Pleas</b>	e match th	e exam find	ling to the B	FCRS item.		
		Excitement	Grimacing	Stereotypy	Mannerism	Perseveration	Other
32)	You ask the patient to wave, and they continue to wave for an additional three seconds even after being asked to stop.	0	0	0	0	0	0
33)	A patient repeatedly flicks their own earlobe.	0	0	0	0	0	0
34)	A patient repeatedly sticks out their tongue.	0	0	0	0	$\circ$	0
35)	A patient marches with a dramatic gait down the hall.	0	0	0	0	$\circ$	0
36)	A patient repeatedly blinks their eyes and furrows their brows in an exaggerated manner.	0	0	0	0	0	0
37)	A patient continuously squirms in their chair.	0	0	0	0	0	$\bigcirc$
38)	A patient repeatedly runs their hands through their hair.	0	0	0	0	$\circ$	0
39)	A patient hops down the hall like a frog.	0	0	0	0	$\circ$	$\circ$
40)	A patient keeps their lips puckered.	0	0	0	0	0	0

○ Voc	
○ Voc	
○ Yes ○ No	
○ Yes	
	○ No

	Minimal Engagement: Please match the exam finding to the BFCRS item.						
		Immobility/Stupo r	Staring	Withdrawal	Negativism	Other	
44)	The patient has a straight-ahead gaze even when the head is manually turned by the examiner (i.e. absent 'doll's eyes' sign).	0	0	0	0	0	
45)	A patient who has been squatting for the past 15 minutes will not stand up when asked to.	0	0	0	0	0	
46)	The patient has not eaten in 24 hours despite being able to talk to staff and ambulate.	0	0	0	0	0	
47)	The patient who has not initiated attempts to move or eat in over 24 hours begins to eat when staff feed them.	0	0	0	0	0	
48)	A patient will not look at the face of the examiner throughout the whole interview even when asked to; however, they are otherwise able to track the movement of objects in the room.	0	0	0	0	0	
49)	A patient who has been reclining motionless in their chair throughout the interview will not stand up when asked to.	0	0	0	0	0	
50)	A patient's eyes remain tightly shut in response to manual attempts to open them by the clinician.	0	0	0	0	0	

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

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