

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. 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: Clinician-Rated Severity of Nonsuicidal Self-Injury

Rights granted: This measure can be reproduced without permission by researchers and by clinicians for use with their patients.

Rights holder: American Psychiatric Association

To request permission for any other use beyond what is stipulated above, contact: <http://www.appi.org/CustomerService/Pages/Permissions.aspx>

CLINICIAN-RATED SEVERITY OF

NONSUICIDAL SELF-INJURY

Name: _____ Age: _____ Sex: Male Female Date: _____

Instructions:

This clinician-rated severity measure is used for the assessment of the presence and severity of any NONSUICIDAL SELF-INJURY (NSSI) behaviors or problems.

Based on all the information you have on the individual receiving care and using your clinical judgment, please rate (✓) the presence and severity of the non-suicidal self-injury behaviors or problems as experienced by the individual **in the past year**.

	Level 0	Level 1	Level 2	Level 3	Level 4
Rate the level or severity of the NONSUICIDAL SELF-INJURY problems that are present for this individual.	<input type="checkbox"/> None (No NSSI acts or NSSI acts on fewer than 3 days AND no urge to self-injure again.)	<input type="checkbox"/> Subthreshold (NSSI acts on 2-4 days OR has self-injured in the past on 5 or more days and has reported urges to self-injure again.)	<input type="checkbox"/> Mild (NSSI acts on 5–7 days using a single method and not requiring surgical treatment [other than cosmetic].)	<input type="checkbox"/> Moderate (NSSI acts on 8–11 days using a single method and not requiring surgical treatment [other than cosmetic] OR NSSI acts on 5–7 days using more than one method.)	<input type="checkbox"/> Severe (At least 1 NSSI act that required surgical treatment [other than cosmetic] OR NSSI acts on 12 or more days using a single method OR NSSI acts on 8 or more days using more than one method.)

Copyright © 2013 American Psychiatric Association. All rights reserved.

This material can be reproduced without permission by researchers and by clinicians for use with their patients.

Instructions to Clinicians

The Clinician-Rated Severity of Nonsuicidal Self-Injury assesses the level or severity of nonsuicidal self-injurious behaviors or problems that are present for this individual. The measure is intended to capture meaningful variation in the severity of symptoms, which may help with treatment planning and prognostic decision-making. The measure is completed by the clinician at the time of the clinical assessment. The clinician is asked to rate the severity of the nonsuicidal self-injurious behavior as experienced by the individual in the past year.

Scoring and Interpretation

The Clinician-Rated Severity of Nonsuicidal Self-Injury is rated on a 5-point scale (Level 0=None; 1=Subthreshold; 2=Mild; 3=Moderate; and 4=Severe). The clinician is asked to review all available information for the individual and, based on his or her clinical judgment, select (✓) the level that most accurately describes the severity of the individual’s condition.

Frequency of Use

To track changes in the individual’s symptom severity over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the individual’s symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the individual that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.