

Neuropsychiatric History Taking Checklist

I. Behavioural and Psychological Symptoms

- A. Mood
 - Depression
 - Elation and Mania
- B. Anxiety
 - Restlessness, autonomic symptoms, repetitive behaviours
- C. Psychosis
 - Delusion, Hallucinations
- D. Personality and Social conduct
 - Avolition: Lack of motivation [get-up-and-go behaviour]
 - Apathy: deterioration of eating, grooming, hygiene, table manners
 - Asociality / Dysociality
 - + loss of social graces -> faux pas, dirty jokes, inappropriate sexual behaviour
 - + Childish / ego centric behaviour
 - + Disinhibition
 - + Lack of empathy
 - Impulsivity
 - Emotional blunting
- E. Sleep
 - Insomnia, Hypersomnia, Parasomnia, OSA
- F. Appetite
 - Incr or Decr Appetite / Wt gain, Wt loss
 - Craving for sweet food
 - Stereotypical pattern [Timing/Type/Anorexia/Bulimia/Rumination]
- G. Risks
 - Suicide
 - Safety

II. Cognitive symptoms

- A. Attention
 - inability to concentrate when reading or watching TV
 - difficulty following conversation [when language is normal]
 - slips of everyday action
- B. Memory
 - Anterograde [rate degree pt 0-10, rel. 0-10]
 - difficulty recalling messages, conversation, recent event
 - losing things
 - repetitiveness
 - disorientation
 - Retrograde
 - past personal events
 - Semantic
 - difficulty naming people, places, things
- C. Language
 - Production
 - fluent and articulate as normal
 - word finding difficulty
 - misuse of words
 - grammatical errors

- Comprehension
 - esp. diff. understanding complex instructions
- Reading / Writing difficulty
- D. Calculation and Executive function
 - handling money, shopping, bank, bills
 - plan, set goal, execute, monitor
- E. Visuo-spatial
 - ability to dress
 - ability to use day to day objects
 - constructional ability [in case of artists, architects etc.]
- F. Neglect
 - able to respond to people and objects on both sides
 - unaware of sensory stimuli on one side of the body
- G. Visual perception
 - able to recognize peoples faces
 - color identification problem
- H. ADL / IADL if not already covered
 - able to do shopping, housework, accounting, food prep, telephone
 - need help with dressing, eating, ambulation, toileting, hygiene

III. Informant History

- A. When was the first problem observed?
- B. Onset – Acute, Insidious, Stuttering
- C. Enquire about particular difficulties in various day to day settings
 - work
 - housework
 - driving
 - using money
 - hobbies
 - social encounters

IV. Key issues in Medical History

- A. Birth and early development
- B. Organ systems review: heart, lung, liver, kidney, skin, joint, eye, thyroid
- C. Hypertension
- D. Diabetes
- E. Head injury
- F. Seizures or Spells
- G. Substance use
- H. Current Medications
- I. Family history of neuropsychiatric disorder

V. Key issues in review of systems

- A. Constitutional symptoms: fever, malaise, weight loss, pain complaints
- B. Neurological symptoms:
 - Headache
 - CN1: Sensation of smell, abnormal smells
 - CN2: Loss or blurring of vision
 - CN3,4,6: Diplopia, squint

- CN5: Numbness of the face, tingling of face, difficulty chewing
- CN7: Slurring of speech, drooping of angle of mouth, drooling, stasis of food
- CN8: difficulty hearing, tinnitus, vertigo, dizziness
- CN9, 10: Dysarthria, swallowing disturbance

- weakness or sensory loss, clumsiness, gait disturbance, alteration of urinary or defecatory function, altered sexual function, tremors, tics, spasms

C. Paroxysmal limbic phenomena: micropsia, macropsia, metamorphopsia, déjà vu and jamais vu, déjà écouté and jamais écouté, forced thoughts or emotions, depersonalization/derealization, autoscopy, paranormal experiences such as clairvoyance or telepathy

D. Endocrine symptoms: heat or cold sensitivity, constipation or diarrhea, rapid heart rate, alopecia or change in texture of hair, change in skin pigmentation, change in menses

E. Rheumatic disease symptoms: joint pain or swelling, mouth ulcers, dry mouth or eyes, rash, past spontaneous abortions