

## PSYCHIATRIC MENTAL STATUS EXAM

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**Reading:** Section on the mental status exam in whichever physical diagnosis text you are using. (In Bates, *A Guide to Physical Examination and History Taking*, 7<sup>th</sup> Edition, pp 107-128)

### Learning Objectives:

After completing the reading, attending the lecture, and attending a small group discussion on the psychiatric mental status exam, the student should be able to:

1. List the parts of the mental status exam.
2. Define: mood, affect, thought process, thought content, illusion, and hallucination.
3. Know how to assess a patient's intellectual (cognitive) functions including: orientation, concentration/attention, memory, use of language, fund of knowledge, abstract thinking, insight and judgement.

### Sample Quiz Question:

Asking what he or she would do if he or she found a stamped and addressed envelope on the ground is one way to test a patient's:

- A. Abstract thinking
- B. Fund of knowledge
- C. Attention
- D. Recent memory
- E. Judgement

Answer: E

## The Psychiatric Mental Status Exam (MSE) Checklist

### I. Appearance and behavior

Dress, grooming, hygiene

Posture and gait

Facial expression

Eye contact (and relatedness to examiner)

Motor activity

Other mannerisms or behaviors

Degree of cooperation with exam

### II. Speech

Rate

Quantity

Volume (loudness)

Fluency

Clarity (articulation)

### III. Emotions

Mood: Pervasive and maintained emotional state, sometimes given in patient's own words. Examples: sad, happy, angry, anxious.

Affect: Outward manifestation of mood. How the patient shows his feelings.

Predominant

Intensity

Lability

Appropriateness

#### **IV. Thought**

Process: Associations. How ideas fit together, including rate and flow.

Content: What is being thought.

#### **V. Perceptions**

Illusions: Misinterpreted sensory inputs.

Hallucinations: Perceiving input in absence of external sensory stimulation.

#### **VI. Sensorium and intellectual (cognitive) functions (See attached table)**

Level of Consciousness

Orientation

Concentration/ Attention

Memory

    Immediate (new learning)

    Recent

    Remote

Use of Language

    Comprehension

    Repetition

    Naming

    Reading

    Writing

Fund of knowledge

Abstract thinking

Insight

Judgement

**VII. How the patient makes you feel.**

**MINI-MENTAL STATE EXAMINATION**

Patient \_\_\_\_\_

Examiner \_\_\_\_\_

Date \_\_\_\_\_

Maximum  
Score    Score

**Orientation**

- 5**    ( )    What is the (year) (season) (date) (month)?  
**5**    ( )    Where are we: (state) (country) (town) (hospital) (floor)

**Registration**

- 3**    ( )    Name three objects: 1 second to say each. Then ask the patient all three after you have said them. Give 1 point for each correct answer. Then repeat them until he learns all three. Count trials and record.

Trials \_\_\_\_\_

**Attention And Calculation**

- 5**    ( )    Serial 7s. 1 point for each correct. Stop after five answers. Alternatively, spell 'world' backwards.

**Recall**

- 3**    ( )    Ask for the three objects repeated above. Give 1 point for each correct answer.

**Language**

- 9**    ( )    Name a pencil, and watch. (2 points).  
Repeat the following: "No ifs, ands, or buts." (1 point)  
Follow a three-stage command:  
    "Take a paper in your right hand, fold it in half, and put it on the floor." (3 points)  
Read and obey the following:  
    Close your eyes (1 point)  
    Write a sentence. (1 point)  
    Copy design. (1 point)

Perfect score = 30

Any score below 25 indicates the presence of significant cognitive dysfunction.

Assess the level of consciousness along a continuum:

Alert    Drowsy    Stupor    Coma

(Used with permission from Folstein MF, Folstein SE, McHugh PR: Mini-Mental State: A practical method for grading the cognitive state of patients for the clinician. J Psychiatric Res 12:189-198, 1975)

Clinical psychiatry for medical students / edited by Alan Stoudemire.

- 3<sup>rd</sup> ed. 1998