CLINICAL SKILLS: MENTAL STATE EXAMINATION

This examination is used in a psychiatric setting for examining a patient's mental state.

Appearance and behaviour

- Dress appropriate for weather and day?
- Well kempt or showing signs of self neglect
- Excessive or very little movements (agitation vs depression)
- Additional movements, e.g.: abnormal posturing, tardive dyskinesia etc.
- Eye contact
- Facial expression

Speech

- Volume
- Pitch
- Rate
- Fluency
- Articulation
 - Stammering
 - Stuttering
 - o Dysarthria
- Quantity pressure of speech vs. poverty of speech

Mood

- Objective
- Subjective
- Affect how the patient is right now
- Congruous on incongruous to thoughts and/or actions?

Thoughts

- Content of the thoughts
 - o Thought disorders
 - Thought insertion
 - Thought withdrawal
 - Thought broadcasting
- Delusions
 - o Of control passivity
 - Grandiose
 - o Paranoid
- Obsessional thoughts
- Phobic thoughts
- Circumstantiality
- Tangentiality
- Flight of ideas (seen in mania)
- Loosening of associations (seen in schizophrenia)
- Perseveration
- Echolalia
- Neologisms (seen in schizophrenia)



Perception

- Illusions
- Hallucinations
 - o Auditory. 3rd person schizophrenia
 - Visual
 - Somatic
 - Olfactory
 - o Gustatory
- Depersonalisation
- Derealisation

Cognition

• MMSE

Insight

• Does the patient have insight into any abnormalities in their mental state?

Risk

- · Of harm to self
 - o Include self harm and suicide risk
- Harm to others
 - o Include criminal record
 - o Harm to children
- Harm from others
 - o Any accidents
 - Substance abuse
 - o Previous psychiatric illness
- · Family history of psychiatric illness
- · Support family and friends

Summary