# Mental State Assessment

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# What is expected?

- Confidentiality
- Expertise
- Professional confidence
- Warmth and guidance
- Non judgmental attitude
- Insight of patient himself

# Why?

### For,

- An accurate diagnosis
- Planning
- Intervention

# How?

- Presenting complaint current problem, for how long
- Precipitating factors for the current problem if any
- Progression of the illness
- If diagnosed to have a psychiatric illness, when diagnosed who diagnosed drugs taken relapses

- Medical hx : co morbidities
- Past psychiatric hx : as above
- Personal hx: birth complications, parent conflicts, sibling rivalries, schooling, educational level, love affairs, suicidal attempts, substance abuse etc
- Drug hx: treatment which the patient on. Their side effects, any change in drugs, compliance
- Allergy hx
- Pre morbid personality cheerful or not, interests, hobbies
- Social hx social, family support, financial level

## **Examination**

 Appearance – grooming, personal hygiene, appropriateness of clothing, posture, gestures, attention

Behaviour – eye contact, body language, responses to others

3. Mood – subjectively and objectively

4. Speech – volume, tone, speed, quantity, flow

5. Thought content – thought process and perception(delusions, hallucinations)

6. memory – short/ long term memory

7. Insight – subjectively and objectively

 Mini-Mental State Examination will be discussed in "Dementia" lecture

### Exercise 01

 Discuss how would you intervene a patient coming to ward with,

- depression
- BAD
- Schizophrenia