

Screening Tool

The essential features of OCD identified in DSM-IV-TR (Diagnostic and Statistical Manual of Mental Disorders) are Recurrent, unwanted obsessions or compulsions that are

- Severe enough to be time consuming (i.e., they take more than one hour a day), or
- Cause marked distress or significant impairment

Disorders (nearly a quarter of the U.S. population in any given year) do not seek treatment, often due to fear of stigma and resulting discrimination. On average, it takes several years from the time OCD symptoms first appear for people to obtain appropriate treatment. The World Health Organization includes OCD among the top 10 Most debilitating nonfatal illnesses.

OCD can be difficult to diagnose for several reasons:

- Patients often hide their symptoms and withhold information from family, friends, and doctors. The Y-BOCS can be accessed at
- Symptoms are often misidentified as other conditions

- Other conditions, such as phobias, separation anxiety, social anxiety disorder, eating disorders, alcohol abuse or dependence, panic disorder, Tourette’s Syndrome, and depression confound the diagnosis.

OCD is likely to be under-diagnosed unless specific Screening occurs. Below is the Zohar-Fineberg OCD Screen (Z-FOCS), a brief tool that a doctor, nurse, or physician’s assistant may use to help assess patients initially for OCD.

A positive response to any of the questions suggests further inquiry may be advisable.

For patients who screen positive, the Y-BOCS (Yale-Brown Obsessive Compulsive Scale) is a more robust, standard test that rates the severity of OCD Symptoms. It tracks time occupied by interference and distress from obsessions, as well as resistance to them.

The Y-BOCS can be accessed at:
<http://www.brainphysics.com/research/ybocs.pdf>.

Zohar-Fineberg Obsessive Compulsive Screen (Z-FOCS)

| These Questions are designed to screen for the presence of obsessive-compulsive disorder. Please tick the response you think is correct. | Yes | No |
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| 1. Do you wash or clean a lot? | | |
| 2. Do you check things a lot? | | |
| 3. Is there any thought that keeps bothering you that you would like to get rid of but can't? | | |
| 4. Do your daily activities take a long time to finish? | | |
| 5. Are you concerned about orderliness or symmetry? | | |