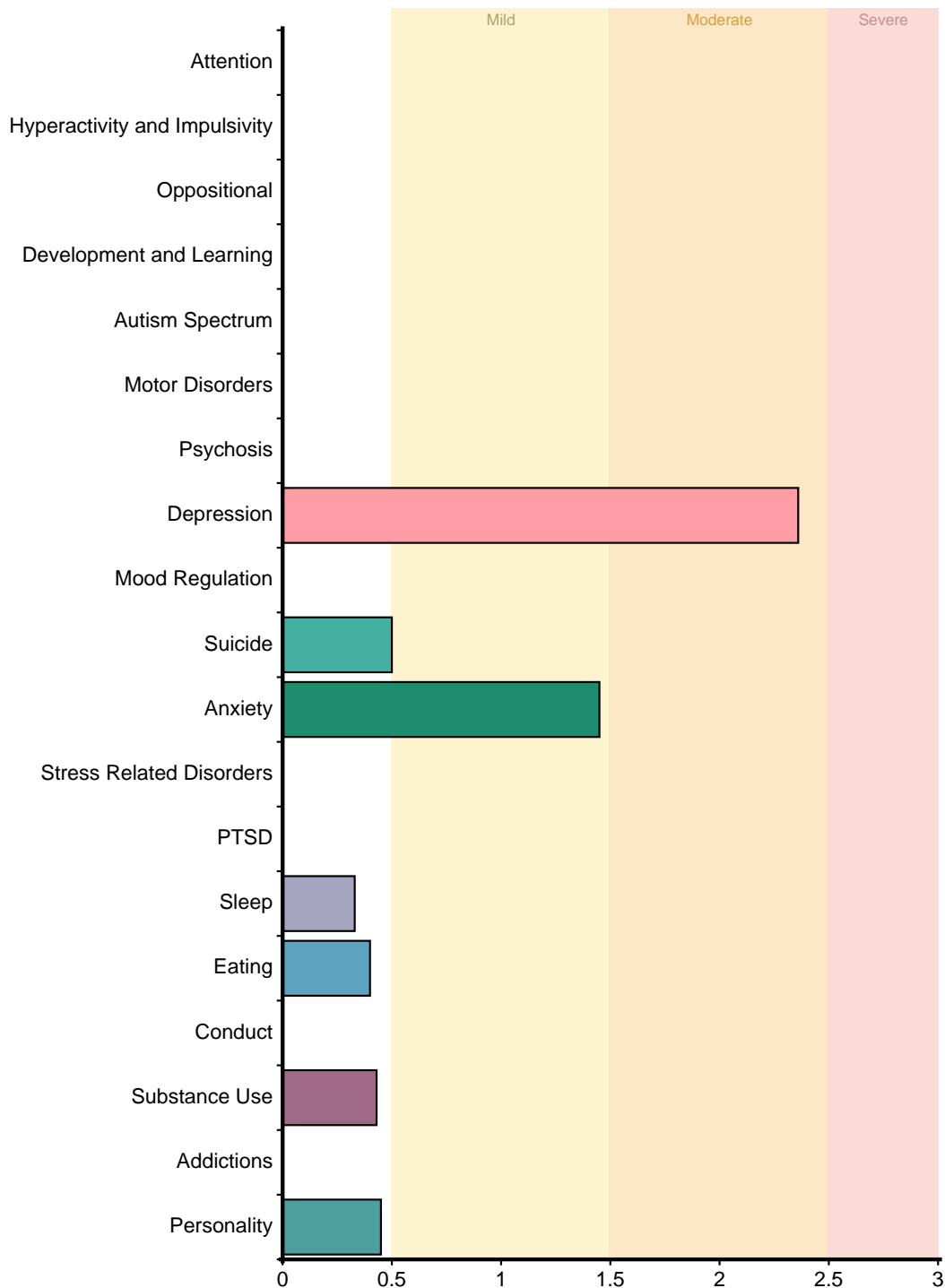




### Weiss Symptom Record II (WSR-II)

<i>Client Name</i>	Generic Client	<i>Date administered</i>	3 Jul 2024
<i>Date of birth (age)</i>	1 Jan 1980 (44)	<i>Time taken</i>	6 min 38s
<i>Assessor</i>	Dr Simon Baker		

**Weiss Symptom Record II (WSR-II) Average Scores**





<b>Client Name</b>	Generic Client
--------------------	----------------

## Results

	Clinically Significant (%)	Average Rating (0-3)	Descriptor
Attention		0	-
Hyperactivity and Impulsivity		0	-
Oppositional		0	-
Development and Learning		0	-
Autism Spectrum		0	-
Motor Disorders		0	-
Psychosis		0	-
Depression	100	2.36	Moderate
Mood Regulation		0	-
Suicide	50	0.5	Risk Identified
Anxiety	64	1.45	Mild
Stress Related Disorders		0	-
PTSD		0	-
Sleep		0.33	-
Eating		0.4	-
Conduct		0	-
Substance Use	14	0.43	-
Addictions		0	-
Personality	9	0.45	-

## Interpretation

The responses on the Weiss Symptom Record II (WSR-II) questionnaire indicate that the client is experiencing clinically significant difficulties with 21 symptoms.

The responses indicate a risk of suicide based on the following symptom.

*Rated as Mild:*

- Suicidal thoughts

It is recommended to follow suicide risk assessment protocols to determine the severity and immediacy of the risk.

The average ratings indicate that the client is experiencing clinically significant difficulties with 1 symptom cluster.

### **Depression**

The responses indicate clinically significant difficulties with the following symptoms.

*Rated as Severe:*

- Sad or depressed most of the day
- Lack of interest or pleasure most of the day
- Feels worthless
- Hopeless, pessimistic



**Client Name** | Generic Client

## Interpretation (cont.)

i>Rated as Moderate:

- Weight loss, weight gain, or change in appetite
- Difficulty sleeping or sleeping too much
- Agitated
- Slowed down
- Tired, no energy
- Withdrawal from usual interests/people
- Decrease in concentration

NovoPsych recommends further assessment with a questionnaire such as:

- [Depression Anxiety Stress Scales - Short Form \(DASS-21\)](#)
- [Patient Health Questionnaire \(PHQ-9\)](#)
- [Center for Epidemiologic Studies Depression Scale - Revised \(CESD-R\)](#)
- [Montgomery-Asberg Rating Scale \(MADRS\)](#)

## Scoring and Interpretation Information

For comprehensive information on the WSR-II, [see here](#).

Scoring of the WSR-II involves looking at the pattern of responses within and across different clusters of symptoms (i.e., subscales). Items rated on the Likert scale as “Moderate” or “Severe” are defined as “problematic” or “clinically significant”.

The percentage of symptoms rated as “Moderate” or “Severe” within each cluster of symptoms and the average rating (range: 0-3) of symptoms within each cluster are provided. This highlights the level of difficulty associated with each cluster of symptoms relative to other clusters.

A descriptor is provided for each symptom cluster based on the average rating of symptoms within each cluster. The descriptors and average rating value ranges are as follows.

Mild: 0.50-1.49

Moderate: 1.50-2.49

Severe: 2.50-3

Symptom clusters classified as “Moderate” or “Severe” are considered clinically significant, indicating that further investigation and diagnostic assessment are required. The WSR-II results cannot be used for diagnostic purposes. NovoPsych highlights symptom clusters associated with clinically significant difficulties and recommends relevant questionnaires for further assessment.

If administered more than once, a graph showing the changes in clinically significant symptom clusters is presented, providing a useful visual tool for monitoring treatment progress and outcomes.

## Client Responses



<b>Client Name</b>	Generic Client
--------------------	----------------

		None	Mild	Moderate	Severe	NA
1	<b>ATTENTION</b> Attention to details or makes careless mistakes	0	1	2	3	0
2	Holding attention or remaining focused	0	1	2	3	0
3	Listening or mind seems elsewhere	0	1	2	3	0
4	Instructions or finishing work	0	1	2	3	0
5	Organising (e.g., time, messy, deadlines)	0	1	2	3	0
6	Avoids or dislikes activities requiring effort	0	1	2	3	0
7	Loses or misplaces things	0	1	2	3	0
8	Easily distracted	0	1	2	3	0
9	Forgetful (e.g., chores, bills, appointments)	0	1	2	3	0
10	<b>HYPERACTIVITY AND IMPULSIVITY</b> Fidgets or squirms	0	1	2	3	0
11	Trouble staying seated	0	1	2	3	0
12	Runs about or feels restless inside	0	1	2	3	0
13	Loud or difficulty being quiet	0	1	2	3	0
14	Often on the go	0	1	2	3	0
15	Talks too much	0	1	2	3	0
16	Blurts out comments	0	1	2	3	0
17	Dislikes waiting (e.g., taking turns or in line)	0	1	2	3	0
18	Interrupts or intrudes on others (e.g., butting in)	0	1	2	3	0
19	<b>OPPOSITIONAL</b> Loses temper	0	1	2	3	0
20	Easily annoyed	0	1	2	3	0



**Client Name** | Generic Client

### Client Responses (cont.)

		None	Mild	Moderate	Severe	NA
21	Angry and resentful	0	1	2	3	0
22	Argues	0	1	2	3	0
23	Defiant	0	1	2	3	0
24	Deliberately annoys other people	0	1	2	3	0
25	Blames other people rather than themselves	0	1	2	3	0
26	Spiteful	0	1	2	3	0
27	DEVELOPMENT AND LEARNING Wetting (after age 5)	0	1	2	3	0
28	Soiling (after age 4)	0	1	2	3	0
29	Reading	0	1	2	3	0
30	Spelling	0	1	2	3	0
31	Math	0	1	2	3	0
32	Writing	0	1	2	3	0
33	AUTISM SPECTRUM Difficulty with talking back and forth	0	1	2	3	0
34	Unusual eye contact or body language	0	1	2	3	0
35	Speech is odd (monotone, unusual words)	0	1	2	3	0
36	Restricted, fixed, intense interests	0	1	2	3	0
37	Odd, repetitive movements (e.g., flapping)	0	1	2	3	0
38	Does not easily chit chat	0	1	2	3	0
39	MOTOR DISORDERS Repetitive noises (e.g., sniffing, throat clearing)	0	1	2	3	0



**Client Name** | Generic Client

### Client Responses (cont.)

		None	Mild	Moderate	Severe	NA
40	Repetitive movements (blinking, shrugging)	0	1	2	3	0
41	Clumsy	0	1	2	3	0
42	PSYCHOSIS Hearing voices that are not there	0	1	2	3	0
43	Seeing things that are not there	0	1	2	3	0
44	Scrambled thinking	0	1	2	3	0
45	Paranoia (feeling people are against you)	0	1	2	3	0
46	DEPRESSION Sad or depressed most of the day	0	1	2	3	0
47	Lack of interest or pleasure most of the day	0	1	2	3	0
48	Weight loss, weight gain, or change in appetite	0	1	2	3	0
49	Difficulty sleeping or sleeping too much	0	1	2	3	0
50	Agitated	0	1	2	3	0
51	Slowed down	0	1	2	3	0
52	Feels worthless	0	1	2	3	0
53	Tired, no energy	0	1	2	3	0
54	Hopeless, pessimistic	0	1	2	3	0
55	Withdrawal from usual interests/people	0	1	2	3	0
56	Decrease in concentration	0	1	2	3	0
57	MOOD REGULATION Distinct period(s) of intense excitement	0	1	2	3	0
58	Distinct period(s) of inflated self-esteem, grandiose	0	1	2	3	0



**Client Name** | Generic Client

**Client Responses (cont.)**

		None	Mild	Moderate	Severe	NA
59	Distinct period(s) of increased energy	0	1	2	3	0
60	Distinct period(s) of decreased need for sleep	0	1	2	3	0
61	Distinct period(s) of racing thoughts or speech	0	1	2	3	0
62	Irritable behaviour that is out of character	0	1	2	3	0
63	Rage attacks, anger outbursts, hostility	0	1	2	3	0
64	<b>SUICIDE</b> Suicidal thoughts	0	1	2	3	0
65	Suicide attempt(s) or a plan	0	1	2	3	0
66	<b>ANXIETY</b> Intense fears (e.g., heights, crowds, spiders)	0	1	2	3	0
67	Fear of social situations or performing	0	1	2	3	0
68	Panic attacks	0	1	2	3	0
69	Fear of leaving e.g., the house, public transportation	0	1	2	3	0
70	Worrying and/or anxious most days	0	1	2	3	0
71	Nervous, can't relax	0	1	2	3	0
72	Obsessive thoughts (e.g., germs, perfectionism)	0	1	2	3	0
73	Compulsive rituals (e.g., checking, hand washing)	0	1	2	3	0
74	Hair pulling, nail biting, or skin picking	0	1	2	3	0
75	Preoccupation with physical complaints	0	1	2	3	0
76	Chronic pain	0	1	2	3	0
77	<b>STRESS RELATED DISORDERS</b> Physical abuse	0	1	2	3	0



**Client Name** | Generic Client

### Client Responses (cont.)

		None	Mild	Moderate	Severe	NA
78	Sexual abuse	0	1	2	3	0
79	Neglect	0	1	2	3	0
80	Other severe trauma	0	1	2	3	0
81	PTSD Flashbacks or nightmares	0	1	2	3	0
82	Avoidance	0	1	2	3	0
83	Intrusive thoughts of traumatic events	0	1	2	3	0
84	SLEEP Trouble falling asleep or staying asleep	0	1	2	3	0
85	Excessive daytime sleepiness	0	1	2	3	0
86	Snoring or stops breathing during sleep	0	1	2	3	0
87	EATING Distorted body image	0	1	2	3	0
88	Underweight	0	1	2	3	0
89	Binge eating	0	1	2	3	0
90	Overweight	0	1	2	3	0
91	Eating too little or refusing to eat	0	1	2	3	0
92	CONDUCT Verbal aggression	0	1	2	3	0
93	Physical aggression	0	1	2	3	0
94	Used a weapon against people (stones, sticks, etc.)	0	1	2	3	0
95	Cruel to animals	0	1	2	3	0
96	Physically cruel to people	0	1	2	3	0





**Client Name** | Generic Client

### Client Responses (cont.)

		None	Mild	Moderate	Severe	NA
97	Stealing or shoplifting	0	1	2	3	0
98	Deliberately sets fires	0	1	2	3	0
99	Deliberately destroys property	0	1	2	3	0
100	Frequent lying	0	1	2	3	0
101	Lack of remorse or guilt	0	1	2	3	0
102	Lack of empathy or concern for others	0	1	2	3	0
103	SUBSTANCE USE Misuse of prescription drugs	0	1	2	3	0
104	Alcohol > 14 drinks/week or 4 drinks at once	0	1	2	3	0
105	Smoking or tobacco use	0	1	2	3	0
106	Marijuana	0	1	2	3	0
107	Other street drugs	0	1	2	3	0
108	Excessive over the counter medications	0	1	2	3	0
109	Excessive caffeine (colas, coffee, tea, pills)	0	1	2	3	0
110	ADDICTIONS Gambling	0	1	2	3	0
111	Excessive internet, gaming, or screen time	0	1	2	3	0
112	Other addiction	0	1	2	3	0
113	PERSONALITY Self-destructive	0	1	2	3	0
114	Stormy, conflicted relationships	0	1	2	3	0
115	Self-injurious behaviour (e.g., cutting)	0	1	2	3	0



**Client Name** | Generic Client

**Client Responses (cont.)**

		None	Mild	Moderate	Severe	NA
116	Low self-esteem	0	1	2	3	0
117	Manipulative	0	1	2	3	0
118	Self-centered	0	1	2	3	0
119	Arrogant	0	1	2	3	0
120	Suspicious	0	1	2	3	0
121	Deceitful with no remorse	0	1	2	3	0
122	Breaking the law or antisocial behaviour	0	1	2	3	0
123	Tends to be a loner	0	1	2	3	0