Hallucinations Rating Scale

Applicant Name: James Wilson **Date:** August 17, 2023

Instructions: For each item below, rate the applicant's experiences on a scale of 0-5. Include any additional notes or comments in the designated column. Ensure to respect privacy and maintain confidentiality.

Item No.	Assessment Area	Description	Rating (0-5)	Notes & Comments
1	Frequency	How often do the hallucinations occur?	2	Reports seeing shadows occasionally, especially when alone.
2	Duration	How long do the hallucinations typically last?	3	Frequent reports of hearing whispers, unclear if related to surroundings.
3	Intensity	How intense or vivid are the hallucinations?	1	Rarely feels a sensation of something crawling on skin, not persistent.
4	Distress Level	How distressing are the hallucinations?	0	No reports of unusual smells.
5	Interference	How much do they interfere with daily activities?	0	No reports of unusual tastes.
6	Reactivity	How often do you react to the hallucinations?	0	No reports of sensations inside the body.
7	Location	Where do they seem to originate (e.g., inside head, external)?	2	Occasionally reports simultaneous visual and auditory hallucinations.
8	Content Type	What type are they mainly (e.g., voices, visions, tactile)?	4	Reports that auditory hallucinations can last up to several hours.
9	Emotional Response	What emotions do the hallucinations evoke (e.g., fear, sadness)?	3	Occur a few times a week.
10	Sleep Disturbance	Do they affect sleep?	3	Hallucinations have a moderate effect on social and occupational functioning.
11	Clarity	How clear are the hallucinations?	3	Auditory hallucinations are clear but vague; visual hallucinations are shadowy but distinct.

12	Recognition	Are they recognized as unreal or believed to be real?	2	Recognizes auditory hallucinations as unreal, but sometimes believes visual hallucinations.
13	Content Nature	Are they commanding, threatening, neutral, or comforting?	1	Mostly neutral content, rare reports of threatening voices.
14	Triggers	Are there known triggers (e.g., stress, places, people)?	3	Stress and isolation seem to exacerbate hallucinations.
15	Coping Strategies	Are there strategies used to cope with or manage them?	4	Uses music and talking to friends to cope, but sometimes struggles.
16	Medication Influence	How do medications influence them (if applicable)?	2	Medications reduce frequency but not completely effective.
17	Sensory Modality	Which senses are involved (e.g., auditory, visual, tactile)?	3	Auditory and visual senses are involved.
18	External Factors	Are there external factors that enhance/worsen them (e.g., lighting)?	1	Dim lighting seems to slightly worsen visual hallucinations.
19	Temporal Pattern	When do they usually occur (e.g., night, morning, randomly)?	3	Occur more frequently at night and when alone.
20	Past Interventions	Were there past interventions? How effective were they?	3	Past interventions provided temporary relief but not sustained.

Rating Scale:

0: Not at all / Never	**3:** Sometimes / Moderate
1: Rarely / Very mild	**4:** Often / Moderately severe
2: Occasionally / Mild	**5:** Constantly / Very severe

Further comments/observations:

The applicant's hallucinations primarily involve the auditory and visual senses and tend to be exacerbated by stress and isolation. They usually occur at night and when the applicant is alone. Medications and past interventions have provided some relief, but the hallucinations persist. Coping strategies, such as listening to music and talking to friends, are sometimes helpful, but the applicant still struggles. Further assessment and tailored interventions may be necessary.