

Dysthymic Disorder Diagnostic Tool: 300.4

Name: DOB: ID#:

Dysthymic Disorder Criteria: Has 2 or more of the symptoms from list B for a period of at least 2 years (1 year for children/adolescents) as well as criteria described in A and C – H.

A. Depressed mood for most of the day, for more days than not, as indicated either by subjective account or observation by others.

B. Check the symptoms that have persisted for at least 1 year:

- | | |
|--|--|
| <input type="checkbox"/> Poor appetite or overeating | <input type="checkbox"/> Low self-esteem |
| <input type="checkbox"/> Insomnia or hypersomnia | <input type="checkbox"/> Poor concentration or difficulty making decisions |
| <input type="checkbox"/> Low energy or fatigue | <input type="checkbox"/> Feelings of hopelessness |

C. During the 2-year (1 year for children/adolescents) timeframe, the person has never been without the symptoms in A or B for more than 2 months at a time.

D. No Major Depressive Episode has been present during the criteria timeframe which would better account for the symptoms (chronic MDD, MDD in Partial Remission, etc).

E. There has never been a Manic Episode, Mixed Episode, Hypomanic Episode, or criteria has never been met for Cyclothymic Disorder.

F. The disturbance does not occur exclusively during the course of a chronic Psychotic Disorder, such as Schizophrenia or Delusional Disorder.

G. The Symptoms are not due to the direct physiological effects of a substance or a general medical condition

H. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Clinician's Name: Date of Assessment: Signature:
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