

Practice Quiz Pack 01

Neurodevelopmental & Schizophrenia Spectrum (Ch 1-2)

Printable practice set. Questions first, full answer key at the end of each chapter.

Chapter 1 — Neurodevelopmental Disorders

Practice Questions

The neurodevelopmental category

1. What unites the neurodevelopmental disorders?
 - A. They begin in the developmental period and produce deficits in functioning
 - B. They all begin after age 60
 - C. They all require hallucinations
 - D. They always resolve by adulthood
2. Which disorders did DSM-5 merge into a single autism spectrum disorder?
 - A. ADHD and specific learning disorder
 - B. Autistic disorder, Asperger's disorder, PDD-NOS, and childhood disintegrative disorder
 - C. Tourette's and chronic tic disorder
 - D. Language disorder and speech sound disorder
3. DSM-5 raised the ADHD age-of-onset requirement to the presence of several symptoms before age 12. True / False
4. Which is a change introduced by the 2022 Text Revision rather than DSM-5?
 - A. Merging the pervasive developmental disorders
 - B. Updating the preferred term to 'intellectual developmental disorder' to align with ICD-11
 - C. Raising ADHD onset to age 12
 - D. Adding sensory reactivity to autism criteria
5. Under DSM-5, ADHD and autism spectrum disorder can be diagnosed in the same person. True / False
6. DSM-5 combined the previously separate reading, writing, and mathematics disorders into:
 - A. A communication disorder
 - B. Intellectual developmental disorder
 - C. Specific learning disorder, with specifiers
 - D. A motor disorder
7. The sensory criterion (hyper- or hypo-reactivity to sensory input) was added in DSM-5 to:
 - A. ADHD
 - B. Specific learning disorder
 - C. Tourette's disorder
 - D. Autism spectrum disorder's restricted/repetitive behavior criterion
8. A child younger than 5 has missed expected developmental milestones in several areas, but intellectual functioning and severity cannot yet be assessed reliably. The diagnosis is global developmental _____.

Intellectual Developmental Disorder

9. Intellectual developmental disorder requires deficits in:
 - A. Both intellectual functions and adaptive functioning, with onset in the developmental period
 - B. Intellectual functions only
 - C. Adaptive functioning only
 - D. Motor skills only
10. In DSM-5, the severity of intellectual developmental disorder is determined by:
 - A. IQ score ranges
 - B. Adaptive functioning
 - C. Age of onset
 - D. Head circumference
11. The three domains of adaptive functioning in intellectual developmental disorder are:
 - A. Reading, writing, and math
 - B. Motor, vocal, and sensory
 - C. Conceptual, social, and practical
 - D. Inattentive, hyperactive, and impulsive
12. A diagnosis of intellectual developmental disorder can be made on IQ score alone. True / False
13. Intellectual deficits are confirmed by:
 - A. A single questionnaire
 - B. Parent report only
 - C. A blood test
 - D. Clinical assessment and standardized, individually administered testing

- 14.** An IQ score commonly associated with intellectual developmental disorder is approximately:
 - A. About 70 or below (roughly two standard deviations below the mean)
 - B. About 100
 - C. About 115
 - D. About 130
- 15.** Onset of intellectual developmental disorder must occur during the developmental period. True / False
- 16.** A 30-year-old who lost cognitive abilities after a traumatic brain injury at age 25 should be classified as:
 - A. Intellectual developmental disorder
 - B. A neurocognitive disorder, not intellectual developmental disorder
 - C. Global developmental delay
 - D. Specific learning disorder
- 17.** Which best illustrates an adaptive functioning deficit?
 - A. A high IQ score
 - B. A single low math grade
 - C. Needing ongoing support to manage money, hygiene, and daily tasks expected for one's age
 - D. A stutter
- 18.** Which severity level of intellectual developmental disorder reflects the greatest need for support?
 - A. Mild
 - B. Moderate
 - C. Severe
 - D. Profound
- 19.** Most people diagnosed with intellectual developmental disorder fall in the mild range. True / False
- 20.** In DSM-5, the severity of intellectual developmental disorder is based on _____ functioning.

Autism Spectrum Disorder

- 21.** Criterion A of autism spectrum disorder concerns:
 - A. Persistent deficits in social communication and social interaction
 - B. Restricted, repetitive behaviors
 - C. Inattention
 - D. Reading difficulty
- 22.** How many of the three social-communication areas in Criterion A must be affected?
 - A. One
 - B. All three
 - C. Two
 - D. None
- 23.** Criterion B (restricted, repetitive behaviors) requires at least how many of its four features?
 - A. One
 - B. Three
 - C. Two
 - D. All four
- 24.** Which is one of the four restricted/repetitive behavior features in ASD?
 - A. Inattention
 - B. Hyperactivity
 - C. Reading difficulty
 - D. Hyper- or hypo-reactivity to sensory input
- 25.** Autism spectrum disorder severity is rated:
 - A. Separately for social communication and for restricted/repetitive behaviors, by support needed (levels 1 to 3)
 - B. On a single overall scale
 - C. By IQ only
 - D. By age of onset
- 26.** Asperger's disorder remains a separate diagnosis in DSM-5-TR. True / False
- 27.** Onset of autism spectrum disorder symptoms must be:
 - A. After age 18
 - B. In the early developmental period
 - C. After a traumatic event
 - D. In late adulthood
- 28.** Which is a social-communication deficit (Criterion A), not a repetitive behavior?
 - A. Lining up toys for hours
 - B. Distress at small changes in routine
 - C. Impaired use of eye contact and gestures (nonverbal communication)

D. Hand-flapping

29. A child shows insistence on sameness, highly fixated interests, and hand-flapping, plus impaired reciprocity, poor nonverbal communication, and trouble with relationships, from toddlerhood. Best diagnosis?

- A. ADHD
- B. Social (pragmatic) communication disorder
- C. Specific learning disorder
- D. Autism spectrum disorder

30. A specifier allows coding whether autism spectrum disorder occurs with or without accompanying intellectual impairment. True / False

31. Which ASD specifier captures a known genetic condition such as fragile X or a medical factor?

- A. Associated with a known genetic or other medical condition
- B. With catatonia
- C. With good prognostic features
- D. Provisional

32. Autism spectrum disorder is diagnosed more often in:

- A. Females, by about 4 to 1
- B. Males, by roughly 4 to 1
- C. Equally in both
- D. Only in adults

33. A level 3 severity rating in ASD indicates:

- A. No support needed
- B. Requiring support
- C. Requiring very substantial support
- D. A reading impairment

34. Autism spectrum disorder can be specified 'with catatonia.' True / False

35. Which feature is required for ASD but NOT for social (pragmatic) communication disorder?

- A. Social-communication deficits
- B. Normal intelligence
- C. Onset after age 12
- D. Restricted, repetitive behaviors

36. ASD Criterion B requires at least _____ of four restricted, repetitive behavior features.

Attention-Deficit/Hyperactivity Disorder

37. In children, how many inattention symptoms (of nine) are required for that domain of ADHD?

- A. Six
- B. Three
- C. Four
- D. Nine

38. ADHD requires that several symptoms were present before age:

- A. 7
- B. 12
- C. 18
- D. 21

39. ADHD symptoms must be present in:

- A. One setting only
- B. Only at school
- C. Two or more settings
- D. Only at home

40. For adults (17 and older), the symptom threshold in each ADHD domain is:

- A. Three of nine
- B. Six of nine
- C. Nine of nine
- D. Five of nine

41. The three presentations of ADHD are:

- A. Predominantly inattentive, predominantly hyperactive-impulsive, and combined
- B. Mild, moderate, severe
- C. Bipolar, depressive, and mixed
- D. Reading, writing, and math

42. ADHD can be diagnosed when symptoms appear only in a single setting, such as school. True / False

43. Which is an inattention symptom of ADHD?

- A. Fidgeting and squirming
 - B. Easily distracted and often loses things needed for tasks
 - C. Running or climbing excessively
 - D. Blurting out answers
- 44.** Which is a hyperactivity-impulsivity symptom?
- A. Careless mistakes
 - B. Difficulty sustaining attention
 - C. Interrupting or intruding on others
 - D. Forgetfulness in daily activities
- 45.** A 9-year-old is inattentive and hyperactive at home and school since kindergarten, with academic and social impairment and no other explanation. Best diagnosis?
- A. Autism spectrum disorder
 - B. Specific learning disorder
 - C. Intellectual developmental disorder
 - D. ADHD, combined presentation
- 46.** DSM-5 moved ADHD into the neurodevelopmental disorders chapter. True / False
- 47.** A 28-year-old reports lifelong inattention with five clear symptoms, present since childhood, impairing work and home life across settings. Can ADHD be diagnosed?
- A. Yes, five symptoms meet the adult threshold if onset and other criteria are met
 - B. No, adults cannot have ADHD
 - C. Only if six symptoms are present
 - D. Only with hyperactivity
- 48.** ADHD requires evidence of clear impairment or interference with functioning. True / False
- 49.** A child shows only inattention symptoms (six of nine) without hyperactivity. Best label?
- A. ADHD, combined presentation
 - B. ADHD, predominantly inattentive presentation
 - C. Specific learning disorder
 - D. Not ADHD
- 50.** ADHD requires several symptoms before age _____.

Specific Learning Disorder

- 51.** Specific learning disorder involves difficulty learning:
- A. Social skills
 - B. Motor coordination
 - C. A specific academic skill (reading, written expression, or mathematics)
 - D. Attention
- 52.** The difficulties of specific learning disorder must persist despite targeted help for at least:
- A. 1 month
 - B. 3 months
 - C. 2 years
 - D. 6 months
- 53.** The reading specifier of specific learning disorder is commonly called:
- A. Dyslexia
 - B. Dyscalculia
 - C. Dysgraphia
 - D. Aphasia
- 54.** The mathematics specifier is commonly called:
- A. Dyslexia
 - B. Dyscalculia
 - C. Dyspraxia
 - D. Dysphagia
- 55.** Specific learning disorder is diagnosed when difficulties are fully explained by intellectual developmental disorder or a sensory deficit. True / False
- 56.** A bright 10-year-old reads far below grade level despite tutoring, with normal vision, hearing, and intelligence. Best diagnosis?
- A. Intellectual developmental disorder
 - B. ADHD
 - C. Specific learning disorder, with impairment in reading
 - D. Autism spectrum disorder

57. Specific learning disorder may not become fully apparent until academic demands exceed the person's capacities.

True / False

58. How does specific learning disorder differ from intellectual developmental disorder?

- A. It is global, affecting all abilities
- B. It requires an IQ below 70
- C. It only affects adults
- D. It involves persistent difficulty in one or more academic skills that is not better explained by intellectual developmental disorder; an average-range IQ is not required

Communication disorders and the ASD differential

59. Social (pragmatic) communication disorder is defined by:

- A. Deficits in the social use of communication WITHOUT restricted, repetitive behaviors
- B. Restricted, repetitive behaviors only
- C. A reading deficit
- D. Hyperactivity

60. If a child has social-communication deficits AND restricted, repetitive behaviors, social (pragmatic) communication disorder is the correct diagnosis. True / False

61. Childhood-onset fluency disorder is also known as:

- A. Dyslexia
- B. Stuttering
- C. Echolalia
- D. Aphasia

62. Which communication disorder was newly introduced in DSM-5?

- A. Language disorder
- B. Speech sound disorder
- C. Social (pragmatic) communication disorder
- D. Stuttering

63. A child with difficulty producing speech sounds, making speech hard to understand, most likely has:

- A. Language disorder
- B. Specific learning disorder
- C. Tourette's disorder
- D. Speech sound disorder

64. A child struggles with vocabulary, sentence structure, and connecting sentences across spoken and written language. Most likely:

- A. Language disorder
- B. Speech sound disorder
- C. Stuttering
- D. Dyscalculia

65. A 6-year-old has trouble taking turns in conversation, adjusting speech to context, and understanding nonliteral language, but shows no restricted or repetitive behaviors and no fixated interests. Best diagnosis?

- A. Autism spectrum disorder
- B. Social (pragmatic) communication disorder
- C. Intellectual developmental disorder
- D. ADHD

66. The single feature that distinguishes autism spectrum disorder from social (pragmatic) communication disorder is the presence of restricted, _____ behaviors.

Motor disorders and tics

67. Tourette's disorder requires:

- A. Only vocal tics for 6 months
- B. A single motor tic for 1 month
- C. Multiple motor tics and at least one vocal tic, present at some time, persisting more than 1 year
- D. Tics only after age 18

68. Persistent (chronic) motor OR vocal tic disorder is distinguished from Tourette's by:

- A. Lasting under a month
- B. Onset after age 30
- C. Requiring hallucinations
- D. Having only one type of tic (motor or vocal, not both)

69. Provisional tic disorder is defined by tics lasting:

- A. Less than 1 year
- B. More than 1 year
- C. More than 5 years
- D. A lifetime

70. Tourette's disorder, persistent motor or vocal tic disorder, and provisional tic disorder require onset before what age?

- A. 6
- B. 18
- C. 12
- D. 21

71. Developmental coordination disorder is characterized by:

- A. Tics
- B. Reading difficulty
- C. Motor coordination well below expected for age, impairing daily activities
- D. Inattention

72. Repetitive, driven, apparently purposeless motor behavior (for example, body rocking or hand-waving) that interferes with functioning is:

- A. Tourette's disorder
- B. A compulsion
- C. A tic
- D. Stereotypic movement disorder

73. A 10-year-old has had both eye-blinking and shoulder-shrugging tics and throat-clearing and grunting vocal tics on and off for 18 months. Best diagnosis?

- A. Tourette's disorder
- B. Provisional tic disorder
- C. Persistent (chronic) motor tic disorder
- D. Stereotypic movement disorder

74. A child with only motor tics for three months would be diagnosed with Tourette's disorder. True / False

Differentials, severity, and overview

75. A 7-year-old has global deficits in reasoning and adaptive skills across all domains since early childhood, with IQ testing near 60. Best diagnosis?

- A. Specific learning disorder
- B. Intellectual developmental disorder
- C. ADHD
- D. Social (pragmatic) communication disorder

76. Which pairing of disorder and distinguishing feature is correct?

- A. ASD - no repetitive behaviors
- B. Specific learning disorder - global intellectual deficit
- C. Social (pragmatic) communication disorder - social-communication deficits without repetitive behaviors
- D. ADHD - onset after age 18

77. Match each disorder (left) to its core feature (right).

- | | |
|--|---|
| 1. Intellectual developmental disorder | A. Inattention and/or hyperactivity-impulsivity before age 12, in 2+ settings |
| 2. Autism spectrum disorder | B. Social-communication deficits plus restricted, repetitive behaviors |
| 3. ADHD | C. A specific academic-skill deficit below age level |
| 4. Specific learning disorder | D. Global intellectual and adaptive deficits |

78. Which statement about the neurodevelopmental disorders is most accurate?

- A. They begin in adulthood
- B. Only one can be diagnosed at a time
- C. They require psychosis
- D. They frequently co-occur, and DSM-5 allows combinations such as ADHD with autism spectrum disorder

Answer Key

- **1: A.** Onset in development, with functional deficits.
- **2: B.** The four former pervasive developmental disorders.
- **3: True.** Several symptoms before age 12.
- **4: B.** Terminology update to intellectual developmental disorder.
- **5: True.** ADHD and ASD may be diagnosed together.

- **6: C.** One specific learning disorder with specifiers.
- **7: D.** Sensory reactivity added to ASD.
- **8: delay.**
- **9: A.** Intellectual and adaptive deficits, developmental onset.
- **10: B.** Adaptive functioning sets severity.
- **11: C.** Conceptual, social, practical.
- **12: False.** Adaptive deficits are also required.
- **13: D.** Clinical assessment plus standardized testing.
- **14: A.** About 70 or below.
- **15: True.** Developmental-period onset required.
- **16: B.** A neurocognitive disorder.
- **17: C.** Needing support for age-expected daily tasks.
- **18: D.** Profound.
- **19: True.** Mild is most common.
- **20: adaptive.**
- **21: A.** Social communication and interaction deficits.
- **22: B.** All three areas.
- **23: C.** Two of four.
- **24: D.** Sensory hyper-/hypo-reactivity.
- **25: A.** Rated separately, levels 1 to 3 by support.
- **26: False.** Asperger's folded into ASD.
- **27: B.** Early developmental period.
- **28: C.** Nonverbal communication deficit (Criterion A).
- **29: D.** Autism spectrum disorder.
- **30: True.** With/without intellectual impairment specifier.
- **31: A.** Associated with a known genetic/medical condition.
- **32: B.** More common in males, about 4 to 1.
- **33: C.** Requiring very substantial support.
- **34: True.** 'With catatonia' specifier exists.
- **35: D.** Restricted, repetitive behaviors.
- **36: two.**
- **37: A.** Six of nine in children.
- **38: B.** Before age 12.
- **39: C.** Two or more settings.
- **40: D.** Five of nine for adults.
- **41: A.** Inattentive, hyperactive-impulsive, combined.
- **42: False.** Two or more settings required.
- **43: B.** Distractible, loses things (inattention).
- **44: C.** Interrupting (hyperactive-impulsive).
- **45: D.** ADHD, combined presentation.
- **46: True.** ADHD is a neurodevelopmental disorder.
- **47: A.** Five symptoms meet the adult threshold.
- **48: True.** Interference is required.
- **49: B.** Predominantly inattentive presentation.
- **50: 12.**
- **51: C.** A specific academic skill.
- **52: D.** At least 6 months despite help.
- **53: A.** Dyslexia.
- **54: B.** Dyscalculia.
- **55: False.** Not diagnosed if explained by ID or sensory deficit.
- **56: C.** Specific learning disorder, reading.
- **57: True.** May surface when demands rise.
- **58: D.** Specific skill deficit, not global.
- **59: A.** Social-communication deficit without repetitive behaviors.
- **60: False.** Repetitive behaviors mean ASD.
- **61: B.** Stuttering.
- **62: C.** Social (pragmatic) communication disorder.
- **63: D.** Speech sound disorder.
- **64: A.** Language disorder.
- **65: B.** Social (pragmatic) communication disorder.
- **66: repetitive.**
- **67: C.** Motor plus vocal tics, more than a year.
- **68: D.** Only one tic type.

- **69: A.** Less than 1 year.
- **70: B.** Before age 18.
- **71: C.** Motor coordination below age level.
- **72: D.** Stereotypic movement disorder.
- **73: A.** Tourette's disorder.
- **74: False.** Under a year, single type, is not Tourette's.
- **75: B.** Intellectual developmental disorder.
- **76: C.** SPCD without repetitive behaviors.
- **77: 1-D, 2-B, 3-A, 4-C.**
- **78: D.** They co-occur; ADHD with ASD is allowed.

Chapter 2 — Schizophrenia Spectrum & Other Psychotic Disorders

Practice Questions

The five symptom domains, positive and negative

1. Which list names the five symptom domains that define the psychotic disorders in DSM-5-TR?
 - A. Delusions, hallucinations, disorganized speech, grossly disorganized or abnormal motor behavior, negative symptoms
 - B. Mania, depression, anxiety, insomnia, fatigue
 - C. Obsessions, compulsions, hoarding, tics, trichotillomania
 - D. Flashbacks, avoidance, numbing, hyperarousal, dissociation
2. A delusion is best defined as:
 - A. A perception without an external stimulus
 - B. A fixed false belief that does not change despite clear contradictory evidence
 - C. A fear of a specific object
 - D. A lapse in attention
3. The most common type of hallucination in schizophrenia is:
 - A. Visual
 - B. Tactile
 - C. Auditory
 - D. Olfactory
4. Which is a POSITIVE symptom?
 - A. Avolition
 - B. Diminished emotional expression
 - C. Alogia
 - D. Hallucinations
5. Which pair are the two negative symptoms DSM-5-TR emphasizes most?
 - A. Diminished emotional expression and avolition
 - B. Delusions and hallucinations
 - C. Mania and depression
 - D. Echolalia and echopraxia
6. The negative symptom describing a lack of drive or motivation to pursue goal-directed activity is _____.
7. Speech that drifts from topic to topic with loose connections, at the extreme becoming incoherent 'word salad,' reflects:
 - A. A hallucination
 - B. Disorganized thinking (disorganized speech)
 - C. A negative symptom
 - D. Catatonia
8. Negative symptoms tend to account for much of the long-term disability in schizophrenia. True / False
9. A belief that neutral events (a news anchor's words, a stranger's glance) carry special personal meaning is a:
 - A. Grandiose delusion
 - B. Somatic delusion
 - C. Referential delusion (delusion of reference)
 - D. Nihilistic delusion
10. 'Alogia' refers to:
 - A. Loss of pleasure
 - B. False beliefs
 - C. Abnormal movements
 - D. Poverty of speech or thought
11. Match each term (left) to its meaning (right).

1. Delusion	A. Perception without an external stimulus
2. Hallucination	B. Poverty of speech
3. Avolition	C. Fixed false belief
4. Alogia	D. Loss of drive or motivation

Schizophrenia: Criterion A and the diagnostic rules

12. Criterion A for schizophrenia requires at least how many of the five symptom domains?
 - A. Two
 - B. One
 - C. Three
 - D. Four
13. Beyond requiring two symptoms, Criterion A insists that at least one of them be:
 - A. A negative symptom
 - B. Delusions, hallucinations, or disorganized speech
 - C. Catatonia
 - D. Grossly disorganized behavior
14. A single bizarre delusion, on its own, is sufficient to meet Criterion A for schizophrenia under DSM-5-TR. True / False
15. The active-phase symptoms of Criterion A must be present for a significant portion of at least:
 - A. 1 week
 - B. 3 months
 - C. 1 month (or less if successfully treated)
 - D. 6 months
16. The total duration of continuous signs required for schizophrenia (including prodromal and residual phases) is:
 - A. 1 month
 - B. 3 months
 - C. 12 months
 - D. 6 months
17. In addition to Criterion A, schizophrenia requires evidence of:
 - A. A marked decline in functioning, or failure to achieve the expected level when onset is in childhood or adolescence
 - B. A manic episode
 - C. A specific phobia
 - D. Normal functioning throughout
18. DSM-5 retained the classic schizophrenia subtypes (paranoid, disorganized, catatonic). True / False
19. The 'prodromal' phase of schizophrenia refers to:
 - A. The period of full-blown active psychosis
 - B. An early phase of subtle decline and attenuated symptoms before active psychosis
 - C. Complete recovery
 - D. A medication side effect
20. A 22-year-old has had 8 months of continuous disturbance: 2 months of daily auditory hallucinations and disorganized speech, preceded and followed by social withdrawal and self-neglect, with a clear drop in function. No mood episodes. Best diagnosis?
 - A. Brief psychotic disorder
 - B. Schizophreniform disorder
 - C. Schizophrenia
 - D. Delusional disorder
21. If a person has a history of autism spectrum disorder, additional criteria apply before schizophrenia can be diagnosed. True / False
22. Which single finding would, by itself, make schizophrenia the wrong diagnosis?
 - A. Negative symptoms
 - B. Disorganized speech
 - C. A six-month course
 - D. Psychosis occurring only during major mood episodes
23. At least one of the two Criterion A symptoms must be delusions, hallucinations, or _____.

The duration ladder: brief psychotic, schizophreniform, schizophrenia

24. Brief psychotic disorder lasts:
 - A. At least 1 day but less than 1 month, with full return to prior function
 - B. 1 to 6 months
 - C. At least 6 months
 - D. At least 2 years
25. Schizophreniform disorder is defined by a total duration of:
 - A. Less than 1 month
 - B. 1 month to less than 6 months
 - C. 6 to 12 months
 - D. More than 2 years

- 26.** Schizophreniform disorder requires a decline in functioning, just as schizophrenia does. True / False
- 27.** The schizophreniform specifier used when the person has not yet recovered and six months have not elapsed is:
 A. With good prognostic features
 B. In partial remission
 C. Provisional
 D. With catatonia
- 28.** A 30-year-old develops delusions and disorganized speech 3 days after a sudden bereavement; she recovers fully within 2 weeks. Best diagnosis?
 A. Schizophrenia
 B. Schizophreniform disorder
 C. Delusional disorder
 D. Brief psychotic disorder
- 29.** A 25-year-old has had continuous hallucinations and delusions for 10 weeks, with no mood episode and no substance use. He has not recovered. Best current diagnosis?
 A. Schizophreniform disorder (provisional)
 B. Brief psychotic disorder
 C. Schizophrenia
 D. Schizoaffective disorder
- 30.** If symptoms persist for at least six months and all other schizophrenia criteria are met, a provisional schizophreniform diagnosis is revised to schizophrenia. True / False
- 31.** Which specifier belongs to schizophreniform disorder?
 A. Bipolar type
 B. With good prognostic features
 C. Erotomanic type
 D. Rapid cycling
- 32.** Good prognostic features in schizophreniform disorder include all EXCEPT:
 A. Acute onset within 4 weeks of a change in behavior
 B. Confusion or perplexity at the height of the episode
 C. Blunted or flat affect
 D. Good premorbid functioning
- 33.** Assuming the remaining diagnostic criteria are met, a psychotic illness lasting at least one month but under six months is _____ disorder.
- 34.** Brief psychotic disorder specifiers include which of the following?
 A. Bipolar type and depressive type
 B. Erotomanic, grandiose, jealous
 C. With good prognostic features
 D. With marked stressor(s), with peripartum onset, with catatonia
- 35.** A diagnosis of brief psychotic disorder can be made only after the person has fully recovered within one month. True / False
- 36.** The three duration-based diagnoses (brief psychotic, schizophreniform, schizophrenia) share which requirement?
 A. Active psychotic symptoms with at least one being delusions, hallucinations, or disorganized speech
 B. A concurrent mood episode
 C. Preserved functioning
 D. A medical cause
- 37.** A patient has had one full calendar month of psychosis with schizophrenia Criterion A symptoms and is still ill; mood, substance, and medical causes are excluded. Which diagnosis is now most appropriate?
 A. Brief psychotic disorder
 B. Schizophreniform disorder (provisional)
 C. Schizophrenia
 D. No diagnosis is possible

Schizoaffective disorder and the mood-with-psychosis differential

- 38.** The defining requirement that separates schizoaffective disorder from a mood disorder with psychotic features is:
 A. The presence of any hallucination
 B. A six-month duration
 C. At least two weeks of delusions or hallucinations in the absence of a major mood episode
 D. A manic episode
- 39.** In schizoaffective disorder, mood episode symptoms must be present for:
 A. Less than 10% of the illness

- B. Exactly two weeks
 - C. Only the prodrome
 - D. The majority of the total duration of the illness (active and residual)
- 40.** If psychotic symptoms occur ONLY during major depressive or manic episodes and never otherwise, the diagnosis is:
- A. A mood disorder (depressive or bipolar) with psychotic features
 - B. Schizoaffective disorder
 - C. Schizophrenia
 - D. Delusional disorder
- 41.** The two types of schizoaffective disorder are:
- A. Paranoid and disorganized
 - B. Bipolar type and depressive type
 - C. Erotomaniac and grandiose
 - D. Provisional and persistent
- 42.** A 28-year-old has 2 years of illness: full major depressive episodes with psychosis occupy most of the active and residual course, and there is a clear 3-week stretch of hallucinations while no major mood episode is present; substance and medical causes are excluded. Best diagnosis?
- A. Major depressive disorder with psychotic features
 - B. Schizophrenia
 - C. Schizoaffective disorder, depressive type
 - D. Brief psychotic disorder
- 43.** A major mood episode must be present concurrently with Criterion A at some point for schizoaffective disorder. True / False
- 44.** A 35-year-old has had schizophrenia for years; over that time he has also had a few brief depressive episodes totaling perhaps 10% of the illness. Best diagnosis?
- A. Schizoaffective disorder
 - B. Major depressive disorder
 - C. Bipolar disorder
 - D. Schizophrenia (mood symptoms are present but brief relative to the illness)
- 45.** Which sequence correctly distinguishes the three mood-and-psychosis outcomes?
- A. Psychosis only during mood episodes = mood disorder with psychotic features; full major mood episodes for most of the illness + 2 weeks of psychosis outside a major mood episode = schizoaffective; mood brief relative to psychosis, other criteria met = schizophrenia
 - B. Psychosis only in mood episodes = schizophrenia; mood most of illness + 2 weeks psychosis alone = mood disorder; mood brief = schizoaffective
 - C. All three are the same diagnosis
 - D. Psychosis only in mood episodes = delusional disorder
- 46.** Schizoaffective disorder is essentially 'schizophrenia plus any depressive symptom.' True / False
- 47.** Which feature is required for schizoaffective disorder but NOT for a mood disorder with psychotic features?
- A. A depressive episode
 - B. At least two weeks of delusions or hallucinations in the absence of a major mood episode
 - C. Hallucinations at some point
 - D. Impaired functioning
- 48.** Schizoaffective disorder requires at least _____ weeks of delusions or hallucinations with no concurrent major mood episode.
- 49.** A manic episode with mood-congruent grandiose delusions, present only while manic, points to:
- A. Schizoaffective disorder, bipolar type
 - B. Schizophrenia
 - C. Bipolar I disorder, with psychotic features
 - D. Delusional disorder, grandiose type

Delusional disorder and its types

- 50.** Delusional disorder requires one or more delusions lasting at least:
- A. 1 week
 - B. 3 months
 - C. 6 months
 - D. 1 month
- 51.** A hallmark of delusional disorder, separating it from schizophrenia, is that:
- A. Apart from the delusion's impact, functioning is not markedly impaired and behavior is not obviously odd

- B. Functioning is markedly impaired and behavior is bizarre
 - C. Negative symptoms dominate
 - D. Hallucinations are prominent
- 52.** A patient is convinced, without evidence, that a coworker is secretly in love with her and sends coded signals. Which delusional disorder type is this?
- A. Persecutory
 - B. Erotomantic
 - C. Grandiose
 - D. Somatic
- 53.** A man is certain, against medical testing, that he is infested with parasites under his skin. This is which type of delusional disorder?
- A. Jealous
 - B. Grandiose
 - C. Somatic
 - D. Persecutory
- 54.** A woman without evidence is convinced her partner is unfaithful and follows him constantly. This delusional disorder type is:
- A. Erotomantic
 - B. Persecutory
 - C. Mixed
 - D. Jealous
- 55.** Which is NOT a recognized delusional disorder type?
- A. Disorganized
 - B. Persecutory
 - C. Grandiose
 - D. Mixed
- 56.** Under DSM-5, delusional disorder can be diagnosed even when the delusion is bizarre. True / False
- 57.** Prominent, continuous auditory hallucinations are typical of delusional disorder. True / False
- 58.** A 60-year-old believes government agents are monitoring him through his smart meter and has reported it to police, but otherwise works and self-cares normally, with no hallucinations or disorganization, for 8 months. Best diagnosis?
- A. Schizophrenia
 - B. Delusional disorder, persecutory type
 - C. Brief psychotic disorder
 - D. Schizoaffective disorder
- 59.** The delusional disorder type defined by a false belief of inflated worth, power, or special identity is the _____ type.

Catatonia

- 60.** Catatonia is diagnosed when at least how many of its twelve characteristic features are present?
- A. One
 - B. Two
 - C. Three
 - D. Six
- 61.** Which is a feature of catatonia?
- A. Avolition
 - B. Delusion of reference
 - C. Tangentiality
 - D. Waxy flexibility
- 62.** A patient repeats back exactly what the examiner says. This catatonic feature is:
- A. Echolalia
 - B. Echopraxia
 - C. Stereotypy
 - D. Negativism
- 63.** Catatonia can occur in the context of psychotic, mood, and medical conditions, not schizophrenia alone. True / False
- 64.** A patient holds whatever posture the examiner places his limbs in, even uncomfortable ones. This is:
- A. Stereotypy
 - B. Catalepsy
 - C. Mutism

D. Agitation

65. Which pair are both catatonic features?

- A. Anhedonia and alogia
- B. Derailment and tangentiality
- C. Mutism and negativism
- D. Grandiosity and flight of ideas

66. Catatonia requires at least _____ of twelve psychomotor features.

Substances, medical causes, epidemiology, course, and history

67. A patient develops vivid psychosis during heavy stimulant use that clears within days of stopping. Best diagnosis?

- A. Schizophrenia
- B. Schizophreniform disorder
- C. Delusional disorder
- D. Substance/medication-induced psychotic disorder

68. New psychosis with fluctuating consciousness, disorientation, and abnormal vital signs should first prompt consideration of:

- A. Delirium or another medical cause
- B. Schizophrenia
- C. Delusional disorder
- D. Schizoaffective disorder

69. The approximate lifetime prevalence of schizophrenia in the general population is:

- A. About 5%
- B. Under 1% (roughly 0.3-0.7%)
- C. About 10%
- D. About 20%

70. Regarding age at onset of schizophrenia, which is generally true?

- A. Onset is typically after age 60
- B. Onset is almost always before age 10
- C. Onset is usually in late adolescence to the mid-30s, often earlier in males than females
- D. There is no sex difference in onset

71. Prominent negative symptoms and insidious onset are generally favorable prognostic signs in schizophrenia. True / False

72. Which statement about suicide risk in schizophrenia is accurate?

- A. Suicide risk is negligible
- B. Risk applies only to mood disorders
- C. Risk disappears with any treatment
- D. A meaningful minority attempt suicide and risk is elevated, which the TR underscores with new self-harm codes

73. Which change belongs to DSM-5 (2013) rather than the 2022 Text Revision?

- A. Requiring two Criterion A symptoms with at least one of delusions, hallucinations, or disorganized speech
- B. Adding suicidal behavior codes
- C. Refreshing prevalence text
- D. Updating culture-related text

74. Schizotypal personality disorder is listed within the schizophrenia spectrum chapter, though its full criteria sit in the personality disorders chapter. True / False

75. A 19-year-old college student has 5 weeks of worsening delusions, disorganized speech, and self-neglect; this is the entire duration of illness, with no earlier prodromal or residual signs. Urine toxicology is negative and there is no mood episode. The main reason NOT to call this schizophrenia yet is:

- A. He is too young
- B. The total duration has not reached six months
- C. He has negative symptoms
- D. Toxicology was negative

76. Which is the best single discriminator between schizophrenia and delusional disorder?

- A. Presence of any false belief
- B. Age of onset
- C. The breadth of symptoms and functional impact: schizophrenia has multiple Criterion A features and marked decline; delusional disorder has delusions with largely intact function
- D. Sex of the patient

77. Match each diagnosis (left) to its key defining feature (right).

1. Brief psychotic disorder

A. 6+ months, with functional decline

2. Schizophreniform disorder
3. Schizophrenia

- B. 1 to under 6 months
- C. Full major mood episodes for most of the active/residual illness, concurrent schizophrenia Criterion A symptoms, and at least two weeks of delusions or hallucinations without a major mood episode
- D. 1 day to under 1 month, full recovery

4. Schizoaffective disorder

78. A patient has continuous schizophrenia Criterion A symptoms for 7 months, with marked functional decline. During the same illness, a full manic episode lasts 3 weeks; major mood episodes occupy only a small minority of the active and residual course. Substance and medical causes have been excluded. Which schizophrenia-spectrum diagnosis best fits?

- A. Schizoaffective disorder, bipolar type
- B. Bipolar I disorder with psychotic features
- C. Schizophreniform disorder
- D. Schizophrenia

Answer Key

- **1: A.** Delusions, hallucinations, disorganized speech, disorganized/abnormal motor behavior, negative symptoms.
- **2: B.** Fixed false belief resistant to evidence.
- **3: C.** Auditory hallucinations are most common.
- **4: D.** Hallucinations are a positive symptom.
- **5: A.** Diminished emotional expression and avolition.
- **6: avolition.**
- **7: B.** Disorganized speech reflects disorganized thinking.
- **8: True.** Negative symptoms drive much long-term disability.
- **9: C.** Delusion of reference.
- **10: D.** Alogia = poverty of speech.
- **11: 1-C, 2-A, 3-D, 4-B.**
- **12: A.** Two or more Criterion A symptoms.
- **13: B.** At least one must be delusions, hallucinations, or disorganized speech.
- **14: False.** A single symptom no longer suffices.
- **15: C.** One month of active-phase symptoms (or less if treated).
- **16: D.** Six months total.
- **17: A.** Functional decline is required.
- **18: False.** Subtypes were eliminated in DSM-5.
- **19: B.** Prodrome = early decline before active psychosis.
- **20: C.** 6+ months, active symptoms, decline, no mood/substance cause.
- **21: True.** Autism history adds the 1-month delusions/hallucinations requirement.
- **22: D.** Psychosis only during mood episodes rules out schizophrenia.
- **23: disorganized speech.**
- **24: A.** 1 day to under 1 month, full recovery.
- **25: B.** 1 to under 6 months.
- **26: False.** Schizophreniform does not require functional decline.
- **27: C.** Provisional.
- **28: D.** Brief psychotic disorder.
- **29: A.** Schizophreniform (provisional).
- **30: True.** Past 6 months it becomes schizophrenia.
- **31: B.** With good prognostic features.
- **32: C.** Flat affect is a poor, not good, prognostic sign.
- **33: schizophreniform.**
- **34: D.** With stressor(s), peripartum onset, with catatonia.
- **35: False.** It can be diagnosed provisionally during the episode.
- **36: A.** Active psychosis with one of delusions/hallucinations/disorganized speech.
- **37: B.** At 4 weeks and ongoing, schizophreniform (provisional).
- **38: C.** Two weeks of psychosis without a mood episode.
- **39: D.** Mood symptoms span the majority of the illness.
- **40: A.** Mood disorder with psychotic features.
- **41: B.** Bipolar type and depressive type.
- **42: C.** Schizoaffective disorder, depressive type.
- **43: True.** A mood episode concurrent with Criterion A is required.
- **44: D.** Brief mood symptoms keep it schizophrenia.
- **45: A.** The correct mapping of the three outcomes.

- **46: False.** It is a specific longitudinal pattern, not any low mood.
- **47: B.** The 2-week psychosis-without-mood window.
- **48: two.**
- **49: C.** Psychosis only while manic = bipolar I with psychotic features.
- **50: D.** At least 1 month of delusion(s).
- **51: A.** Function largely intact, behavior not bizarre.
- **52: B.** Erotomanic type.
- **53: C.** Somatic type.
- **54: D.** Jealous type.
- **55: A.** 'Disorganized' is not a delusional disorder type.
- **56: True.** DSM-5 dropped the nonbizarre requirement.
- **57: False.** Prominent hallucinations are not typical.
- **58: B.** Delusional disorder, persecutory type.
- **59: grandiose.**
- **60: C.** Three of twelve features.
- **61: D.** Waxy flexibility.
- **62: A.** Echolalia.
- **63: True.** Catatonia spans psychotic, mood, and medical conditions.
- **64: B.** Catalepsy / waxy flexibility.
- **65: C.** Mutism and negativism.
- **66: three.**
- **67: D.** Substance/medication-induced psychotic disorder.
- **68: A.** Delirium or another medical cause.
- **69: B.** Under 1% (about 0.3-0.7%).
- **70: C.** Late teens to mid-30s, earlier in males.
- **71: False.** Negative symptoms and insidious onset are unfavorable.
- **72: D.** Elevated suicide risk; TR added self-harm codes.
- **73: A.** The two-symptom rule is a DSM-5 change.
- **74: True.** Schizotypal is cross-listed in the spectrum.
- **75: B.** Duration under six months.
- **76: C.** Breadth of symptoms and functional impact.
- **77: 1-D, 2-B, 3-A, 4-C.**
- **78: D.** Minority mood symptoms keep it schizophrenia.