Brief explanation of a 5 Axis Diagnosis

from Mental-Health-Matters website.

For further information on mental health disorders, refer to the DSM-IV or find many good resources available free from the National Institute of Mental Health website at http://www.nimh.nih.gov/.

The diagnosis that is made is standardized according the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV). With this manual, there is a 5 Axis system of diagnosis that is used. The five axes are as follows:

Axis I: Clinical Disorders

This includes:

- Disorders usually diagnosed in infancy, childhood or adolescence (Autism, ADHD, Etc.)
- Delerium, dementia and other cognitive disorders (Dementias, Alzheimer's Disease, etc.)
- Mental disorders due to a general medical condition
- Substance-related disorders (such as alcohol or drugs)
- Schizophrenia and other psychotic disorders
- Mood disorders (Depression, Bipolar)
- Anxiety disorders
- Somatoform disorders (Conversion Disorder, Hypochondriasis, etc.)
- Factitious disorders
- Dissociative disorders (Dissociative Identity Disorder, etc.)
- Sexual and gender identity disorders
- Eating disorders (Anorexia, Bulimia, etc.)
- Sleep disorders (Insomnia, Sleep Terrors, etc.)
- Impulse-control disorders (Intermittent Explosive Disorder, Kleptomania, etc.)
- Adjustment disorders

Axis II: Personality Disorders and Mental Retardation

Examples:

- Paranoid personality disorder
- Borderline personality disorder
- Antisocial personality disorder
- Dependent personality disorder
- Mental retardation

Axis III: General Medical Condition

Listed here are general medical (physical) concerns that may have a bearing on understanding the client's mental disorder, or in the management of the client's mental disorder

Axis IV: Psychosocial and Environmental Problems

- Problems with the primary support group (divorce, abuse, deaths, births, etc.)
- Problems related to social environment (retirement, living alone/friendships, etc.)
- Educational problems (illiteracy, academic problems, conflict with teachers, etc.)
- Occupational problems (unemployment, difficult work conditions, job dissatisfaction, etc.)
- Housing problems (homelessness, unsafe neighborhood, problems with neighbors, etc.)
- Economic problems (poverty, insufficient finances, etc.)
- Problems with access to health care services (inadequate health care, transportation to health care, health insurance, etc.)
- Problems related to interaction with the legal system/crime (arrest, incarceration, or victim of crime, etc.)
- Other psychosocial and environmental problems (Disasters, problems with health care providers, etc.)

Axis V: Global Assessment of Functioning

This is a number from 1-100 that reflects the caregiver's judgment of the overt level of functioning. A general outline of the levels is:

- 100: No symptoms
- 90: Minimal symptoms, good functioning
- 80: Transient symptoms that are expected reactions to psychosocial stressors
- 70: Mild symptoms OR some difficulty in social occupational or school functioning
- 60: Moderate symptoms OR moderate difficulty in social, occupation or school

- functioning
- 50: Serious symptoms OR any serious impairment in social occupational or school functioning
- 40: Some impairment in reality testing or communication OR major impairment in several areas such as work or school, family relations, judgment, thinking or mood
- 30: Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment OR inability to function in almost all areas
- 20: Some danger of hurting self or others OR occasionally fails to maintain minimal personal hygiene OR gross impairment in communication
- 10: Persistent danger of severely hurting self or others OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death