

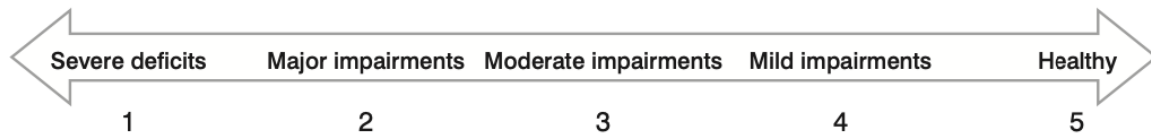
Psychodiagnostic Chart—Elderly (PDC-E)

Name: _____ Age: ____ Gender: _____ Ethnicity: _____
 Date of evaluation: ___/___/___ Evaluator: _____

Section I: Mental Functioning (ME Axis)

Rate your patient’s level of strength or weakness on each of the 12 mental functions below, on a scale from 1 to 5 (1 = Severe deficits; 5 = Healthy). Then sum the 12 ratings for a level-of-severity score.

Although most older adults do not have significant cognitive impairment, it is important to assess for presence of cognitive impairment or neurocognitive disorders that may affect mental functioning.



• **Cognitive and affective processes**

- 1. Capacity for regulation, attention, and learning _____
- 2. Capacity for affective range, communication, and understanding _____
- 3. Capacity for mentalization and reflective functioning _____

• **Identity and relationships**

- 4. Capacity for differentiation and integration (identity) _____
- 5. Capacity for relationships and intimacy _____
- 6. Capacity for self-esteem regulation and quality of internal experience _____

• **Defense and coping**

- 7. Capacity for impulse control and regulation _____
- 8. Capacity for defensive functioning _____
- 9. Capacity for adaptation, resiliency, and strength _____

• **Self-awareness and self-direction**

- 10. Self-observing capacities (psychological mindedness) _____
- 11. Capacity to construct and use internal standards and ideals _____
- 12. Capacity for meaning and purpose _____

Overall level of personality severity (Sum of 12 mental functions): _____

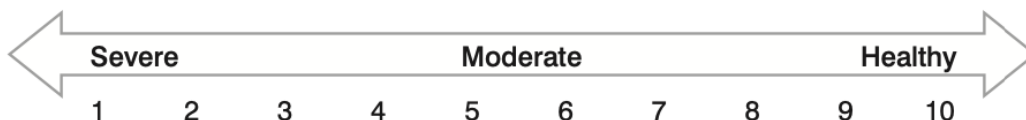
[Healthy/optimal mental functioning, 54–60; Good/appropriate mental functioning with some areas of difficulty, 47–53; Mild impairments in mental functioning, 40–46; Moderate impairments in mental functioning, 33–39; Major Impairments in mental functioning, 26–32; Significant defects in basic mental functions, 19–25; Major/severe defects in basic mental functions, 12–18]

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Psychodiagnostic Chart—Elderly (PDC-E) *(page 2 of 4)*

Section II: Level of Personality Organization

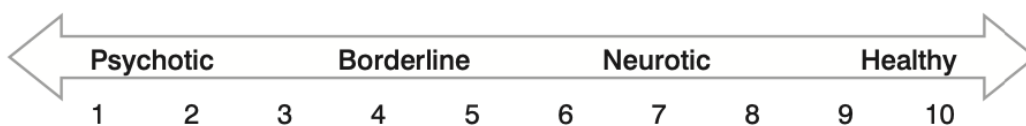
Consider your patient's mental functions in determining the level of personality organization. Use these four mental functions to efficiently capture the level of personality organization, and don't forget you are evaluating an older person who falls into one of these age groups: young-old (55–64 years of age), middle-old (65–74 years of age), old-old (75–84 years of age), and oldest-old (85 years of age or older). Rate each mental function on a scale from 1 (Severely impaired) to 10 (Healthy).



1. **Identity:** Ability to view self in complex, stable, and accurate ways _____
2. **Object relations:** Ability to maintain intimate, stable, and satisfying relationships _____
3. **Level of defenses** (using the guide below, select a single number): _____
 - 1–2: Psychotic level (delusional projection, psychotic denial, psychotic distortion)
 - 3–5: Borderline level (splitting, projective identification, idealization/devaluation, denial, acting out)
 - 6–8: Neurotic level (repression, reaction formation, intellectualization, displacement, undoing)
 - 9–10: Healthy level (anticipation, self-assertion, sublimation, suppression, altruism, and humor)
4. **Reality testing:** Ability to appreciate conventional notions of what is realistic _____

Overall Personality Organization

Considering the ratings and your clinical judgment, circle your client's overall personality organization.



Healthy personality: Characterized by mostly 9–10 scores; life problems rarely get out of hand, and enough flexibility to accommodate to challenging realities. (Use 9 for people at the high-functioning neurotic level.)

Neurotic level: Characterized by mostly 6–8 scores; basically a good sense of identity, good reality testing, mostly good intimacies, fair resiliency, fair affect tolerance and regulation; rigidity and limited range of defenses and coping mechanisms; favors defenses such as repression, reaction formation, intellectualization, displacement, and undoing. (Use 6 for people who go between borderline and neurotic levels.)

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Borderline level: Characterized by mostly 3–5 scores; recurrent relational problems; difficulty with affect tolerance and regulation; poor impulse control, poor sense of identity, poor resiliency; favors defenses such as splitting, projective identification, idealization/devaluation, denial, omnipotent control, and acting out.

Psychotic level: Characterized by mostly 1–2 scores; delusional thinking; poor reality testing and mood regulation; extreme difficulty functioning in work and relationships; favors defenses such as delusional projection, psychotic denial, and psychotic distortion. (Use 3 for people who go between psychotic and borderline levels.)

(There are no sharp cutoffs between categories. Use your clinical judgment.)

Section III: Personality Syndromes (PE Axis)

These are relatively stable patterns of thinking, feeling, behaving, and relating to others. Normal-level personality patterns do not involve impairment, while personality syndromes or disorders involve impairment at the neurotic, borderline, or psychotic level. Don't forget you are evaluating an older person, so take into consideration:

- Possible age-related behavioral features that may confound the diagnosis of a personality syndrome or disorder
- Possible effects of the aging process on previous personality syndromes
- Possible effects of personality syndromes on the aging process

Check off as many personality syndromes as apply from the list below; then circle the one or two personality styles that are most dominant. Leave blank if none.

(For research purposes, you may also rate the level of severity for all styles, using a 1–5 scale: 1 = Severe level; 3 = Moderate severity; and 5 = High-functioning.)

- | | <i>Level of severity</i> |
|---|--------------------------|
| <input type="checkbox"/> Depressive | _____ |
| Subtypes: | |
| • Introjective | |
| • Anaclitic | |
| • Converse manifestation: Hypomanic | |
| <input type="checkbox"/> Dependent | _____ |
| Subtypes: | |
| • Passive–aggressive | |
| • Converse manifestation: Counterdependent | |
| <input type="checkbox"/> Anxious–avoidant and phobic | _____ |
| <input type="checkbox"/> Obsessive–compulsive | _____ |
| <input type="checkbox"/> Schizoid | _____ |

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