

**ST2-AP-EPA11 – Differential diagnosis of first time psychosis**

<b>Area of practice</b>	Adult psychiatry (Early Psychosis Intervention)	<b>EPA identification</b>	ST2-AP-EPA11	
<b>Stage of training</b>	Stage 2 – Proficient	<b>Version</b>	v0.2 (EC-approved 06/11/15)	
The following EPA will be entrusted when your supervisor is confident that you can be trusted to perform the activity described at the required standard without more than distant (reactive) supervision. Your supervisor feels confident that you know when to ask for additional help and that you can be trusted to appropriately seek assistance in a timely manner.				
<b>Title</b>	<b>Differential diagnosis in people presenting for the first time with psychosis.</b>			
<b>Description</b> Maximum 150 words	The trainee can develop and discuss an appropriate formulation and differential diagnoses in young people and adults presenting for the first time with psychosis. This includes the ability to undertake a full assessment, organise appropriate investigations, gather collateral information and from all these, determine likely differential diagnoses according to a recognised diagnostic system. The trainee can develop a management plan based on these differential diagnoses and discuss and explain differential diagnoses with patients and families/carers after assessment and during follow-up.			
<b>Fellowship competencies</b>	<b>ME</b>	1, 2, 3, 4, 5, 6, 7	<b>HA</b>	2
	<b>COM</b>	1, 2	<b>SCH</b>	2
	<b>COL</b>	1, 2, 3, 4	<b>PROF</b>	1, 2
	<b>MAN</b>			
<b>Knowledge, skills and attitude required</b> The following lists are neither exhaustive nor prescriptive.	<p>Competence is demonstrated if the trainee has shown sufficient aspects of the knowledge, skills and attitude described below.</p> <p><b>Ability to apply an adequate knowledge base</b></p> <ul style="list-style-type: none"> <li>• Knowledge of relevant diagnostic systems and categories and their benefits and limitations including an appreciation of the diagnostic instability of first episode psychosis.</li> <li>• Knowledge of how to develop an appropriate biopsychosociocultural diagnostic formulation.</li> <li>• Understanding how to weigh the strengths and weaknesses of various differential diagnoses so as to determine the most likely option or options.</li> <li>• Understanding the ways in which psychosis may present with unusual features in young people presenting with first episodes.</li> <li>• Understanding the pros and cons of making a definite diagnosis vs avoiding foreclosing on one diagnosis too early in the course of a psychosis.</li> </ul>			

- Understanding and articulating the arguments for and against the use of the diagnostic category psychosis not otherwise specified (NOS) vs utilising a diagnosis of schizophrenia as soon as diagnostic criteria are met.
- Understanding how differing developmental levels may affect diagnosis in first onset psychosis.
- Understanding how to discuss the formulation and differential diagnoses with patients and families/carers.
- Understanding how to apply the formulation and differential diagnoses in developing treatment and recovery plans.
- Understanding the features and significance of 'at risk mental states' (ARMS) in people at risk of developing early psychoses.
- Understanding the application of clinical staging models to diagnosis in early psychosis.
- Understanding and applying the stress-vulnerability model (or other explanatory model) in formulating the development of a psychotic episode.
- Understanding that psychotic and psychotic-like experiences sit on a spectrum and how social, cultural and religious factors may influence presentation.

#### **Skills**

- Ability to initially assess people presenting with early psychosis or 'at risk mental states' so as to develop a differential diagnosis. This includes history, mental state evaluation, gathering collateral information and other investigations.
- Ability to apply relevant diagnostic systems to determine appropriate differential diagnoses in the assessment of people with early psychosis.
- Ability to integrate information to develop diagnostic formulations and to present and explain these.
- Ability to discuss and explain differential diagnoses to patients and families/carers after assessment and during follow-up, especially as regards avoidance of foreclosing and promotion of hope, realism and pragmatic options.
- Ability to explain and apply the stress-vulnerability model (or other explanatory model) with patients, families and others.
- Ability to apply the diagnostic formulation and differential diagnoses in developing treatment and recovery plans.
- Ability to review and revise likely differential diagnoses in the light of developing evidence across the course of a person's follow-up and in the light of clinical staging models.
- Ability to diagnose comorbid problems complicating the presentation of early psychosis or 'at risk mental states'.

#### **Attitude**

- An ethical and professional approach to patients, their families and other people important to them during assessment and diagnosis.
- Respect for the knowledge brought by patients, their families and others and a willingness to learn and to develop the diagnosis accordingly.

	<ul style="list-style-type: none"> <li>• Commitment to personal development, eg. reading early intervention-specific literature to develop knowledge and skills specific to diagnosis and the attendant issues in the early intervention field.</li> </ul>
<b>Assessment method</b>	Progressively assessed during individual and clinical supervision, including three appropriate WBAs.
<b>Suggested assessment method details</b>	<ul style="list-style-type: none"> <li>• Observed Clinical Activity (OCA).</li> <li>• Mini-Clinical Evaluation Exercise.</li> <li>• Case-based discussion.</li> </ul>

#### References

EARLY PSYCHOSIS GUIDELINES WRITING GROUP. *Australian Clinical Guidelines for Early Psychosis*. 2nd edn. Melbourne: Orygen Youth Health, 2010.

MCGORRY PD, KILLACKEY E & YUNG A. Early intervention in psychosis: concepts, evidence and future directions. *World Psychiatry* 2008; 7: 148–56.

RAGHA S. *At risk mental state (ARMS), ultra high risk (UHR) and attenuated psychosis syndrome*. PowerPoint slides. June 2014. Viewed 19 August 2015, <[www.slideshare.net/sramragh/arms-uhr-and-aps](http://www.slideshare.net/sramragh/arms-uhr-and-aps)>.

COL, Collaborator; COM, Communicator; HA, Health Advocate; MAN, Manager; ME, Medical Expert; PROF, Professional; SCH, Scholar