



GLOBAL ASSESSMENT OF FUNCTIONING SCALE

Consider psychological, social and occupational functioning on a hypothetical continuum of mental health or illness. Do not include impairment in functioning due to physical (or environmental) limitations. Use intermediate codes when appropriate, such as 45, 68, 72. Rating on the Global Assessment of Functioning (GAF) Scale should be made for two time periods:

- Current - the level of functioning at the time of the evaluation
- Past year - the highest level of functioning for at least a few months during the past year

90: Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).

80: If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in school work).

70: Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational, or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.

60: Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with co-workers).

50: Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (no friends, unable to keep a job).

40: Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed individual avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).

30: Behaviour is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (sometimes incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (stays in bed all day; no job, no friends).

20: Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death, frequently violent, manic excitement) OR occasionally fails to maintain personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).

10: Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain personal hygiene OR serious suicidal act with clear expectation of death.

0: Inadequate information.

Client's name:	UCI number:	UMI number:	IME number:
----------------	-------------	-------------	-------------

Examining Physician Declaration:

I have adequate information to make a global assessment of the functioning of this client.

I have assessed the client's functional status as: _____

Do you have any additional comments you wish to make on this client's functional assessment?

Examining physician name:

Signature:

Date (YYYY-MM-DD):