Severity of Dissociative Symptoms—Adult[*]
[*]Brief Dissociative Experiences Scale (DES-B)—Modified

Name:_____   **Age:** _____   **Date:**_____

Instructions: For each statement below, please check (✓) the box that best answers each question to show how much each thing has happened to you in the past SEVEN (7) DAYS.

		Not at all	Once or twice	Almost every day	About once a day	More than once a day	Clinician Use
							Item score
1.	I find myself staring into space and thinking of nothing.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
2.	People, objects, or the world around me seem strange or unreal.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
3.	I find that I did things that I do not remember doing.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
4.	When I am alone, I talk out loud to myself.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
5.	I feel as though I were looking at the world through a fog so that people and things seem far away or unclear.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
6.	I am able to ignore pain.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
7.	I act so differently from one situation to another that it is almost as if I were two different people.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
8.	I can do things very easily that would usually be hard for me.	❑ 0	❑ 1	❑ 2	❑ 3	❑ 4	
						Total/Partial Raw Score:	
					Prorated Total Raw Score: (if 1-2 items left unanswered)		
						Average Total Score:	

Instructions to Clinicians
The Brief Dissociative Experiences Scale (DES-B)—Modified is an 8-item measure that assesses the severity of dissociative experiences in individuals age 18 and older. The measure is to be completed by the individual upon receiving a diagnosis of a dissociative disorder (or clinically significant dissociative symptoms) and thereafter, prior to follow-up visits with the clinician. Each item asks the individual receiving care to rate the severity of his or her dissociative experiences **during the past 7 days**.

Scoring and Interpretation
Each item on the measure is rated on a 5-point scale (0=Not at all; 1=Once or twice; 2=Almost every day; 3=About once a day, and 4=More than once a day). The total score can range from 0 to 32, with higher scores indicating greater severity of dissociative experiences. The clinician is asked to review the score of each item on the measure during the clinical interview and confirm the individual's score for each item. The scores on the 8 items should be summed to obtain a total raw score. In addition, the clinician is asked to calculate and use the **average total score**. The average total score is calculated by dividing the raw total score by number of items in the measure (i.e., 8). It reduces the overall score to a 5-point scale, which allows the clinician to think of the severity of the individual's dissociative experiences in terms of none (0), mild (1), moderate (2), severe (3), or extreme (4). The use of the average total score was found to be reliable, easy to use, and clinically useful to the clinicians in the DSM-5 Field Trials.

Note: If 3 or more items are left unanswered, the total score on the measure should not be calculated. Therefore, the individual should be encouraged to complete all of the items on the measure. If 1 or 2 items are left unanswered, you are asked to calculate a prorated score. The prorated score is calculated by summing the scores of items that were answered to get a **partial raw score**. Multiply the partial raw score by the total number of items on the DES-B (i.e., 8) and divide the value by the number of items that were actually answered (i.e., either 6 or 7). The formula to prorate the partial raw score to Total Raw Score is:

$$\frac{(\text{Raw sum x 8})}{\text{Number of items that were actually answered}}$$

If the result is a fraction, round to the nearest whole number.

Frequency of Use
To track changes in the severity of the individual's brief dissociative experiences over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the individual's symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the individual that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.