Mild Behavioural Impairment Checklist (MBI-C)

Date: _____

Rated by: ☐ Clinician ☐ Patient representative ☐ Patient

Location: ☐ Clinic ☐ Research

Label

Circle "Yes" **only** if the behaviour has been present for at least **6 months** (continuously, or on and off) and is a **change** from his/her long-standing pattern of behaviour. Otherwise, circle "No".

Please rate severity: **1 = Mild** (noticeable, but not a significant change); **2 = Moderate** (significant, but not a dramatic change); **3 = Severe** (very marked or prominent, a dramatic change). If more than 1 item in a question, rate the most severe.

	YES	NO	SEVERITY
This section describes interest, motivation, and drive			
Has the person lost interest in friends, family, or home activities?	Yes	No	1 2 3
Does the person lack curiosity in topics that would usually have attracted his/her interest?	Yes	No	1 2 3
Has the person become less spontaneous and active – for example, is he/she less likely to initiate or maintain conversation?	Yes	No	1 2 3
Has the person lost motivation to act on his/her obligations or interests?	Yes	No	1 2 3
Is the person less affectionate and/or lacking in emotions when compared to his/her usual self?	Yes	No	1 2 3
Does he/she no longer care about anything?	Yes	No	1 2 3
This section describes mood or anxiety symptoms			
Has the person become sad or does he/she appear to be in low spirits? Does he/she have episodes of tearfulness?	Yes	No	1 2 3
Has the person become less able to experience pleasure?	Yes	No	1 2 3
Has the person become discouraged about his/her future or feel that he/she is a failure?	Yes	No	1 2 3
Does the person view himself/herself as a burden to family?	Yes	No	1 2 3
Has the person become more anxious or worried about things that are routine (e.g. events, visits, etc.)?	Yes	No	1 2 3
Does the person feel very tense, having developed an inability to relax, or shakiness, or symptoms of panic?	Yes	No	1 2 3
This section describes the ability to delay gratification and control behaviour, impulses, oral intake and/or changes in reward			
Has the person become agitated, aggressive, irritable, or temperamental?	Yes	No	1 2 3
Has he/she become unreasonably or uncharacteristically argumentative?	Yes	No	1 2 3
Has the person become more impulsive, seeming to act without considering things?	Yes	No	1 2 3

Does the person display sexually disinhibited or intrusive behaviour, such as touching (themselves/others), hugging, groping, etc., in a manner that is out of character or may cause offence?	Yes No	1 2 3
Has the person become more easily frustrated or impatient? Does he/she have trouble coping with delays, or waiting for events or for their turn?	Yes No	1 2 3
Does the person display a new recklessness or lack of judgement when driving (e.g. speeding, erratic swerving, abrupt lane changes, etc.)?	Yes No	1 2 3
Has the person become more stubborn or rigid, i.e., uncharacteristically insistent on having his/her way, or unwilling/unable to see/hear other views?	Yes No	1 2 3
Is there a change in eating behaviours (e.g., overeating, cramming the mouth full, insisting on eating only specific foods, or eating the food in exactly the same order)?	Yes No	1 2 3
Does the person no longer find food tasty or enjoyable? Is he/she eating less?	Yes No	1 2 3
Does the person hoard objects when he/she did not do so before?	Yes No	1 2 3
Has the person developed simple repetitive behaviours or compulsions?	Yes No	1 2 3
Has the person recently developed trouble regulating smoking, alcohol, drug intake or gambling, or started shoplifting?	Yes No	1 2 3
This section describes following societal norms and having social graces, tact, and empathy		
Has the person become less concerned about how his/her words or actions affect others? Has he/she become insensitive to others' feelings?	Yes No	1 2 3
Has the person started talking openly about very personal or private matters not usually discussed in public?	Yes No	1 2 3
Does the person say rude or crude things or make lewd sexual remarks that he/she would not have said before?	Yes No	1 2 3
Does the person seem to lack the social judgement he/she previously had about what to say or how to behave in public or private?	Yes No	1 2 3
Does the person now talk to strangers as if familiar, or intrude on their activities?	Yes No	1 2 3
This section describes strongly held beliefs and sensory experiences		
Has the person developed beliefs that he/she is in danger, or that others are planning to harm him/her or steal his/her belongings?	Yes No	1 2 3
Has the person developed suspiciousness about the intentions or motives of other people?	Yes No	1 2 3
Does he/she have unrealistic beliefs about his/her power, wealth or skills?	Yes No	1 2 3
Does the person describe hearing voices or does he/she talk to imaginary people or "spirits"?	Yes No	1 2 3
Does the person report or complain about, or act as if seeing things (e.g. people, animals or insects) that are not there, i.e., that are imaginary to others?	Yes No	1 2 3