

The Short OCD Screener (SOCS)

PLEASE ANSWER EACH QUESTION BY TICKING THE BOX THAT MOST APPLIES:			
Does your mind often make you do things - such as checking or touching things or counting things - even though you know you don't really have to?	No ☐	A bit ☐	A lot ☐
Are you particularly fussy about keeping your hands clean?	No ☐	A bit ☐	A lot ☐
Do you ever have to do things over and over a certain number of times before they seem quite right?	No ☐	A bit ☐	A lot ☐
Do you ever have trouble finishing your school work or chores because you have to do something over and over again?	No ☐	A bit ☐	A lot ☐
Do you worry a lot if you've done something not exactly the way you like?	No ☐	A bit ☐	A lot ☐
WHEN ANSWERING THE NEXT TWO QUESTIONS, PLEASE THINK OF WHAT WAS MENTIONED IN THE FIRST FIVE QUESTIONS, ESPECIALLY THOSE THAT YOU HAVE ANSWERED 'A lot' or 'A bit':			
Do these things interfere with your life?	No ☐	A bit ☐	A lot ☐
Do you try to stop them?	No ☐	A bit ☐	A lot ☐

Reference: Uher R, Heyman I, Mortimore C, Frampton I and Goodman R (2007). Screening young people for obsessive compulsive disorder. British Journal of Psychiatry (in press).