



American Psychiatric Association

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DSM

The *Diagnostic and Statistical Manual of Mental Disorders (DSM)* is the standard classification of mental disorders used by mental health professionals in the United States. It is intended to be applicable in a wide array of contexts and used by clinicians and researchers of many different orientations (e.g., biological, psychodynamic, cognitive, behavioral, interpersonal, family/systems). The *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV)* has been designed for use across clinical settings (inpatient, outpatient, partial hospital, consultation-liaison, clinic, private practice, and primary care), with community populations. It can be used by a wide range of health and mental health professionals, including psychiatrists and other physicians, psychologists, social workers, nurses, occupational and rehabilitation therapists, and counselors. It is also a necessary tool for collecting and communicating accurate public health statistics.

The DSM consists of three major components: the diagnostic classification, the diagnostic criteria sets and the descriptive text.

Diagnostic Classification

The *diagnostic classification* is the list of the mental disorders that are officially part of the DSM system. "Making a DSM diagnosis" consists of selecting those disorders from the classification that best reflect the signs and symptoms that are exhibited by the individual being evaluated. Associated with each diagnostic label is a diagnostic code, which is typically used by institutions and agencies for data collection and billing purposes. These diagnostic codes are derived from the coding system used by all health care professionals in the United States, known as the *International Classification of Diseases, Ninth Edition, Clinical Modification (ICD-9-CM)*.

Diagnostic Criteria Sets

For each disorder included in DSM, a set of *diagnostic criteria* indicate what symptoms must be present (and for how long) as well as symptoms, disorders, and conditions that must not be present in order to qualify for a particular diagnosis. Many users of DSM find these diagnostic criteria particularly useful because they provide a concise description of each disorder. Furthermore, use of diagnostic criteria has been shown to increase diagnostic reliability (i.e., likelihood that different users will assign the same diagnosis to an individual). However, it is important to remember that these criteria are meant to be used as guidelines informed by clinical judgment and are not meant to be used in a cookbook fashion.

Descriptive Text

Finally, the third component of DSM is the *descriptive text* that accompanies each disorder. The text of *DSM-IV* systematically describes each disorder under the following headings: "Diagnostic Features"; "Subtypes and/or Specifiers"; "Recording Procedures"; "Associated Features and Disorders"; "Specific Culture, Age, and Gender Features"; "Prevalence"; "Course"; "Familial Pattern"; and "Differential Diagnosis."

For a brief history of the manual, please [click here](#).

To make a suggestion about DSM, please [click here](#).

DSM-IV-TR

This section provides a range of information on the fourth edition of Diagnostic and Statistical Manual of Mental Disorders, Text Revision, including content on:

- [Coding updates in DSM-IV-TR](#)
- [Crosswalk between DSM-IV-TR and ICD](#)
- [Frequently asked questions about DSM-IV-TR](#)

[Please click here to learn more about DSM-IV-TR.](#)

DSM-5

For information about the development and status of the fifth edition of Diagnostic and Statistical Manual of Mental Disorders, please visit the DSM-5 Web site by clicking below. The DSM-5 Web site contains a detailed summary of the events and individuals involved in the revision process, as well as all currently proposed draft diagnostic criteria and changes. DSM-5 is scheduled for release at the 2013 APA Annual Meeting (May 18-22) in San Francisco, California.

[Please click here to learn more about DSM-5.](#)