

PRE-APPOINTMENT CONVERSATION STARTER FOR ADULT PATIENTS WITH SCHIZOPHRENIA

The following questionnaire is not a diagnostic tool and is intended to be a guide to start a conversation with your adult patients with schizophrenia. It is designed to be administered by you or your staff prior to or during scheduled virtual or in-person appointments.

Patient name

Date

YES

NO

Are you taking your medication as directed?

Are you having any side effects from your medication?

If so, please describe your side effects

To report suspected adverse reactions, contact Intra-Cellular Therapies, Inc. at 1-888-611-4824 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Since your last visit, how often have you been experiencing the following?

NONE

LESS



NO CHANGE



MORE

Having auditory or visual hallucinations

Feeling suspicious towards people or acting on your suspicion

Having difficulty concentrating or maintaining your thoughts

Engaging with your family or socializing with your friends

Having difficulty attending school/work or engaging with daily activities

Feeling down, depressed, or hopeless

Having thoughts of hurting yourself or someone else in some way