

- “When did you first experience an attack?” 12, 13
“How often do they occur?” 4, 14, 15
“What seems to precipitate an attack?” 3, 16
“How quickly does the attack develop?” 6
“How do you respond when these attacks occur?” 10, 11, 26, 27
“How long do they last?” 28
“What treatment have you sought before?” 29, 34
“Have you had any other experiences with fear or anxiety?” 30, 31, 32
“Any problems with your mood? Or sleep? Or appetite?” 33
“Have you had any physical or substance use problems?” 35, 36

Let me reiterate that with time and experience, these are the sorts of questions that you'll be able to rattle off (almost without thinking) about most of the complaints your patients will bring to you for evaluation. But there will probably always be a few that will, from time to time, have you returning to a textbook to obtain more information or refresh your memory.

Step 5

Well, we may have glossed over one or two items that a complete evaluation should include, but I think we now have enough information that you can formulate a reasonably thorough differential diagnosis. I hope that you'll write it down.

Note E

Here's my differential diagnosis for Douglas:

- ◇ Anxiety disorder due to another medical condition
- ◇ Substance/medication-induced anxiety disorder
- ◇ Panic disorder