When to refer to a Behavioral Clinician
based on psychosocial instruments

Resource for Cardiac Registry

First, it is important to note that psychosocial testing alone can never be used to provide a diagnosis. This requires at least a follow up interview with a qualified behavioral clinician who may need more information.

Additionally, prior to administration of psychological testing, one needs to be aware that some tests require supervision of a psychologist for purchase and/or supervision of test administration. The test’s manual should always be consulted to ensure the test is appropriate to use with the pulmonary or cardiac population.

Some psychological tests are multi-factored, measuring more than one psychosocial factor, or they can be single factored, measuring one psychosocial factor.

When using a multifactor test, as a rule, a referral would be warranted when:

- a score on one of the psychosocial factor scales is in the severe range, or
- two or more scores are in the moderate range

This method should allow for the fewest false positives. However, it can be reasonable to consider a more liberal referral approach that allows for more latitude in making referral decisions. These criteria would be:

- two or more scores that might be in the mild Range, or
- one score in the moderate range to make a referral

When using a single factor test, a referral would be warranted when the score is in the severe range, but should also be strongly considered when the score is in the mild or moderate range.

Psychological testing has sometimes been called a shorthand way to get to know a patient better. However, there are a couple of other factors that can suggest a referral might be appropriate. Certainly, if the rehab professional observes clear signs of psychosocial disturbance (which can include evidence of anger, anxiety, or detachment from others, as well as depression), a referral should be made. As well, the patient may report concerns of this type with little prompting. A referral should be made in this circumstance as well.

Finally, most psychosocial tools will include an item that asks about suicidal thinking. Certainly, if the patient indicates concern in this area, the rehab professional should be aware of hospital policy concerning what actions to take in this circumstance. Additional information is available at: http://www.aacvpr.org/BehavioralResources. Obviously, a psychosocial test should be scored immediately after its administration.
**Strongly consider a referral to behavioral clinician based on the following criteria:**

### CES-D (Center for Epidemiologic Studies-Depression Scale)

<table>
<thead>
<tr>
<th></th>
<th>0-14</th>
<th>15-21</th>
<th>22-60</th>
</tr>
</thead>
<tbody>
<tr>
<td>CES-D</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CESD-R</td>
<td>0-16</td>
<td>16-26</td>
<td>27-60</td>
</tr>
<tr>
<td>Range</td>
<td>Not Signif</td>
<td>Possible Mild to Moderate</td>
<td>Possible Severe</td>
</tr>
</tbody>
</table>

**Do refer:**
- CES-D—Score in the Severe Range of 22 or higher
- CES-DR—Score in the Severe Range of 27 or higher

**Strongly consider referring:**
- CES-D—Score in the Mild to Moderate Range of 15-21
- CES-DR—Score in the Mild to Moderate Range of 16-26

### PHQ-9 (Patient Health Questionnaire-9)

<table>
<thead>
<tr>
<th>Raw Score</th>
<th>0-4</th>
<th>5-9</th>
<th>10-14</th>
<th>15-19</th>
<th>20-27</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range</td>
<td>Not Signif</td>
<td>Minimal Sx</td>
<td>Dysthymia to (Mild) Major Dep</td>
<td>(Moderate) Major Dep</td>
<td>(Severe) Major Dep</td>
</tr>
</tbody>
</table>

**Do refer:**
- Score in the Severe Range of 20 or higher

**Strongly consider referring:**
- Score in the Moderate Range of 15-19

### PRFS (Psychosocial Risk Factor Survey)

<table>
<thead>
<tr>
<th>T-Scores</th>
<th>30-54</th>
<th>54-59</th>
<th>60-65</th>
<th>66-80</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range</td>
<td>Not Signif</td>
<td>Mild</td>
<td>Moderate</td>
<td>Severe</td>
</tr>
</tbody>
</table>

Of the scales Depression, Anxiety, Anger/Hostility, or Social Isolation:

**Do refer:**
- One reaches the Severe Range which is at or above the 95th percentile, or
- Two of these scales are in the Moderate Range, at the 85th percentile or above

**Strongly consider referring:**
- One reaches the Moderate Range which is at or above the 85th percentile, or
- Two of these scales are in the Mild Range, at the 65th percentile or above

### BDI-II (Beck Depression Inventory-II)

<table>
<thead>
<tr>
<th>Raw Score</th>
<th>0-13</th>
<th>14-19</th>
<th>20-28</th>
<th>29-63</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range</td>
<td>Minimal</td>
<td>Mild</td>
<td>Moderate</td>
<td>Severe</td>
</tr>
</tbody>
</table>

**Do refer:**
- Score in the Severe Range of 29 or higher

**Strongly consider referring:**
- Score in the Moderate Range of 20-28