

## OCI-R

The following statements refer to experiences that many people have in their everyday lives. Circle the number that best describes **HOW MUCH** that experience has **DISTRESSED or BOTHERED you during the PAST MONTH**. The numbers refer to the following verbal labels:

0 = Not at all                      3 = A lot  
1 = A little                        4 = Extremely  
2 = Moderately

1. I have saved up so many things that they get in the way.                      0 1 2 3 4
2. I check things more often than necessary.    0 1 2 3 4
3. I get upset if objects are not arranged properly.                                      0 1 2 3 4
4. I feel compelled to count while I am doing things.                                  0 1 2 3 4
5. I find it difficult to touch an object when I know it has  
    been touched by strangers or certain people.                                      0 1 2 3 4
6. I find it difficult to control my own thoughts.                                      0 1 2 3 4
7. I collect things I don't need.    0 1 2 3 4
8. I repeatedly check doors, windows, drawers, etc.                                  0 1 2 3 4
9. I get upset if others change the way I have arranged things.                      0 1 2 3 4
10. I feel I have to repeat certain numbers.    0 1 2 3 4
11. I sometimes have to wash or clean myself simply because  
    I feel contaminated.    0 1 2 3 4
12. I am upset by unpleasant thoughts that come into my  
    mind against my will.    0 1 2 3 4
13. I avoid throwing things away because I am afraid I might  
    need them later.    0 1 2 3 4
14. I repeatedly check gas and water taps and light switches  
    after turning them off.    0 1 2 3 4
15. I need things to be arranged in a particular order.                                  0 1 2 3 4
16. I feel that there are good and bad numbers.    0 1 2 3 4
17. I wash my hands more often and longer than necessary.                          0 1 2 3 4
18. I frequently get nasty thoughts and have difficulty  
    in getting rid of them.    0 1 2 3 4

# **The Obsessive-Compulsive Inventory Revised (OCI-R)**

## **Introduction**

The Obsessive-Compulsive Inventory (OCI) was developed to help determine the severity of obsessive-compulsive disorder (OCD). The Scale was designed as a self-report measure. When completing the short version of the OCI (OCI-R), respondents are asked to select a number between 0 and 4 to best describe how much the experience distressed or bothered them during the past month.

The OCI-R consists of 18 items composing 6 subscales: Washing, Checking, Ordering, Obsessing (i.e. having obsessional thoughts), Hoarding, and Mental Neutralizing. Each item is rated on a 5-point (0- 4) scale of symptom distress.

Mean scores are calculated for each of the six subscales, and an overall mean 'distress' score is provided (rounded to 2 decimal places). Each score is presented as a mean out of a possible maximum of '4'. A total score of 18 or more, or a mean score of 2.5 or more in any of the subscales suggests the presence of OCD, but is not diagnostic.

## **Administration**

Respondents should be given appropriate time and space to complete the questionnaire. A quiet or private room is ideal for administration. Completion of the OCI-R typically takes 5-10 minutes. The clinician administering the OCI-R should introduce it as follows:

“This questionnaire can give me an idea of how things have been going for you in the past month. So, today is (insert date). One month ago takes us back to (insert date). This is the period of time that the questionnaire focuses on. The questionnaire asks you to identify on a scale from 0 to 4 that best describes how much that experience has distressed or bothered you during the past month. There are no right or wrong answers. Do not spend too much time on any one statement. Please answer each question, thinking about how often the difficulty has been occurring and how severe it has been in the past month.”

0 = Not at all

1 = A little (i.e. Once per week or less)

2 = Moderately (i.e. 2 to 3 times per week)

3 = A lot (i.e. 4 to 5 times per week)

4 = Extremely (i.e. 6 or more times a week)

Do you have any questions?”

The clinician should be sure to be available to the respondent during administration to answer any questions that arise during completion of the OCI-R. After completion of the measure, the clinician should make sure that all questions were answered. If items were skipped, the clinician may direct the respondent's attention to those items and ask the respondent to complete them.

## **Scoring**

The OCI-R consists of 18 items composing 6 subscales: Washing, Checking, Ordering, Obsessing (i.e. having obsessional thoughts), Hoarding, and Mental Neutralizing. Each item is rated on a 5-point (0- 4) scale of symptom distress.

Mean scores are calculated for each of the seven subscales, and an overall mean 'distress' score is provided (rounded to 2 decimal places). Each score is presented as a mean out of a possible maximum of '4'. A total score of 18 or more, or a mean score of 2.5 or more in any of the subscales suggests the presence of OCD, but is not diagnostic.