the prior subtypes, then undifferentiated type is diagnosed. Remember that a client’s diagnosis may also change over the years as symptoms form and re-form. The particular subtype diagnosed at one point in time may not match what is currently happening to a client. The subtype of schizophrenia may have shifted, with the undifferentiated subtype now most representative of the course of the disease.

Residual Type
The residual type of schizophrenia is a subtype diagnosis reserved for a client who has had at least one documented episode of schizophrenia but now has no prominent positive symptoms of the illness. Negative symptoms such as flat affect and inability to work are present, but prominent hallucinations, delusions, and disorganized thoughts and behavior are not. When a client has these characteristics, the client is considered to have residual features of the illness and receives this subtype diagnosis.

OTHER PSYCHOTIC DISORDERS
Psychosis occurs in a number of disorders in addition to schizophrenia. The problems with symptoms can be short-lived or may extend into significant periods of time with disability.

Schizophreniform Disorder
Schizophreniform disorder is very similar to schizophrenia except the person has not been ill for very long. The diagnostic criteria are the same as the Criterion A symptoms for schizophrenia. The main difference is that the client has experienced the symptoms for at least 1 month and either recovered from the symptoms before 6 months, or 6 months have not yet elapsed since the original symptoms began. Under the latter set of circumstances, the diagnosis of schizophreniform disorder is provisional until the 6 months have elapsed and then a diagnosis is set. A second difference, besides duration, is that the client may show no impairment in social and work functioning.

Schizophreniform disorder may occur just prior to the onset of schizophrenia (i.e., be prodromal to [precede] schizophrenia), yet approximately one third of clients diagnosed with this disorder recover. The other two thirds go on to have either schizophrenia or schizoaffective disorder.

Schizoaffective Disorder
In schizoaffective disorder, two sets of symptoms—psychotic and mood symptoms—are present concurrently in the same period of illness episode: Criterion A symptoms of schizophrenia and symptoms of a mood disorder (either a major depressive or manic disorder; see Chapter 17). Schizoaffective disorder is less common than, and has a slightly better prognosis than, schizophrenia, but it has a substantially worse prognosis than mood disorders. Interacting with a client who has schizoaffective disorder may require the same skills you would employ with a client who has

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<th>DSM-IV-TR</th>
<th>Diagnostic Criteria for Schizophrenia Subtypes</th>
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| **PARANOID TYPE**  
A type of Schizophrenia in which the following criteria are met:  
A. Preoccupation with one or more delusions or frequent auditory hallucinations.  
B. None of the following is prominent: disorganized speech, disorganized or catatonic behavior, or flat or inappropriate affect. |
| **DISORGANIZED TYPE**  
A type of Schizophrenia in which the following criteria are met:  
A. All of the following are prominent:  
1. disorganized speech  
2. disorganized behavior  
3. flat or inappropriate affect  
B. The criteria are not met for Catatonic Type. |
| **CATATONIC TYPE**  
A type of Schizophrenia in which the clinical picture is dominated by at least two of the following:  
1. motoric immobility as evidenced by catalepsy (including waxy flexibility) or stupor  
2. excessive motor activity (that is apparently purposeless and not influenced by external stimuli)  
3. extreme negativism (an apparently motiveless resistance to all instructions or maintenance of a rigid posture against attempts to be moved) or mutism |
| **UNDIFFERENTIATED TYPE**  
A type of Schizophrenia in which the following criteria are met:  
A. Absence of prominent delusions, hallucinations, disorganized speech, and grossly disorganized or catatonic behavior. |
| **RESIDUAL TYPE**  
A type of Schizophrenia in which the following criteria are met:  
A. Absence of prominent delusions, hallucinations, disorganized speech, and grossly disorganized or catatonic behavior.  
B. There is continuing evidence of the disturbance, as indicated by the presence of negative symptoms or two or more symptoms listed in Criterion A for Schizophrenia, present in an attenuated form (e.g., odd beliefs, unusual perceptual experiences). |