CMRS Tracking Document

Child Mania Rating Scale (CMRS)
Wikipedia Edit-a-thon, 06/16/16

Editing Roles

Read about each role and choose one, then type your name next to the role you have selected. Discuss each person's role as a group and develop a team strategy for working collaboratively and efficiently.

- **Code Master (Ashley/all):** head off all things code-related, provide assistance to the Content Manager with page formatting, enter in references found by the Resource Collector, oversee the entering of information, references, links, etc. into the editing field
- **Resource Collector (Estefany/all):** find quality information and evidence for the article, bolster the article's connectivity by finding other pages/web sites within and outside of Wikipedia to link to within, send sources to the Code Master to enter into the reference list
- **Content Manager (Johayra/all):** pull relevant information from sources gathered by the Resource Collector, use the page template (find link below) and assign content to the appropriate section, organize all information into cohesive, well-written sections with a logical flow
- **Devil's Advocate (Vanesa/all):** take the perspective of a critic and look for ways to improve/fortify the article and its content, exchange ideas with the team to address any weaknesses or biases, find information gaps and work with the team to fill them with additional evidence and sources
- **Recording Secretary (Vanesa/all):** take notes on group strategies and track progress, serve as a sounding board for brainstorming and troubleshooting, report back to the event administrators at the end of the editing session on team collaboration and efficiency, developments/adaptations made along the way, and overall progress

To-Do List for this Page

Here are a few specific elements of the CMRS Wikipedia page that need work/improvement.

- Lots more sources needed - especially in the missing sections below - to help increase this article's credibility and evaluate the CMRS in practice
    - More on the limitations, as well, (including those already listed) to see whether or not these and others not yet listed have been widely affirmed in other studies
- Two sections missing that need to be added
    - No Psychometrics section (Johayra)

        - More peer-reviewed studies on the clinical utility, reliability, and validity of this as an actual assessment tool for bipolar disorder
        - Info on sensitivity in detecting symptom change over the course of treatment
    - No Impact section
        - Clinical impact of this assessment tool on the world
    - See the Wikipedia Page Template for examples of where in the page these sections belong and what should go in them
- ➢ Introduction and/or History & Development section need(s) more detail and references - not enough description beyond the basics of the screener and its items
    - How/why this assessment tool was developed (i.e. design, theoretical background, etc.) and what need it is intended to meet
    - More sources backing up this information
- ~~➢ Link to following pages: (done! Ashley S)~~
    - ~~http://www.div12.org/psychological-treatments/disorders/ and link to the relevant page~~
- ~~➢ Add more links to the "See also" section~~

Useful Links

- ➢ Wikipedia Page Template
- ➢ Help with Editing/Code
- ➢ White-List of Good Sources
- ➢ Edit-a-thon Meetup Page
- ➢ https://en.wikipedia.org/wiki/User:Ongmianli/Assessment_Template

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Process Notes

Use this space to organize your team, collaborate, divide up work, and troubleshoot as needed.

Psychometric Section for CMRS-Parent Version

Construct validity analyses (Exploratory Factor Analysis and Confirmatory Factor Analysis) for the CMRS-P indicated that the scale is unidimensional. Internal consistency measured by Cronbach's alpha was .96 in a sample consisting of ADHD, Bipolar, and healthy control participants. In a sample of participants with bipolar disorder, the cronbach's alpha is .91. This is well above the guideline of .80 for measures to be considered reliable (ref). Additionally, it has the ability to accurately differentiate pediatric bipolar disorder from ADHD and healthy controls greater than 90% of the time.

Correlations between CMRS-P and other several clinician-rating scales intended to measure manic symptoms (e.g. Washington University Schedule for Affective Disorder and Schizophrenia mania module, the Schedule for Affective Disorders and Schizophrenia Mania Rating Scale, and the Young Mania Rating Scales) were excellent (.78 to .98).

Pavuluri, M. N., Henry, D. B., Devineni, B., Carbray, J. A., & Birmaher, B. (2006). Child Mania Rating Scale: Development, Reliability, and Validity. *Journal Of The American Academy Of Child & Adolescent Psychiatry*, *45*(5), 550-560. doi:10.1097/01.chi.0000205700.40700.50

The CMRS-P has also been found to be sensitive in detecting symptom change over the course of pharmacotherapy (West et al. 2011).

The teacher version (CMRS-T) also has 21 items. The internal consistency, measured by Cronbach's alpha, was .86. Correlations between the parent and teacher versions of the CMRS range from .23 (Youngstrom article) to .27 (carlson article). The CMRS teacher version has not been shown to discriminate bipolar from nonbipolar cases at better than chance levels and is not recommended for use in clinical practice for diagnosing bipolar disorder in children (Youngstrom et al 2008 ref).

West, A. E., Celio, C. I., Henry, D. B., & Pavuluri, M. N. (2011). Child Mania Rating Scale-Parent Version: A valid measure of symptom change due to pharmacotherapy. *Journal Of Affective Disorders*, *128*(1-2), 112-119. doi:10.1016/j.jad.2010.06.013

This is the link to the Youngstrom et al (2008) article which compares the psychometric properties of multiple teacher report measures including the CRMS:

http://fy6af6xb5m.scholar.serialssolutions.com/?sid=google&auinit=EA&aulast=Youngstrom&atitle=Comparing+the+psychometric+properties+of+multiple+teacher+report+instruments+as+predictors+of+bipolar+disorder+in+children+and+adolescents&id=doi:10.1002/jclp.20462&title=Journal+of+clinical+psychology&volume=64&issue=4&date=2008&spage=382&issn=0021-9762

Interesting information from the teacher article: the "CMRS-T items and anchors were developed *de novo* with children and adolescents in mind, versus being adapted as a downward extension of an already existing adult-oriented mood rating scale." p.386

Carlson, G. A., & Blader, J. C. (2011). Diagnostic Implications of Informant Disagreement for Manic Symptoms. Journal of Child and Adolescent Psychopharmacology, 21(5), p 399-405. http://online.liebertpub.com/doi/abs/10.1089/cap.2011.0007

Child Mania Rating Scale Impact Outline

The CMRS has been used across multiple settings such XX,XX, XX. It has also been used by psychologists, psychiatrists, and social worker(cite)?

- How it affects assessment in mental health professions

- How it can be used in clinical settings?
- Can it be used to measure symptoms longitudinally? developmentally?
- Use
    - Has been translated into Spanish (Serrano et al., 2011)
- ****this section is pending notes and edits from Becky. Leaving header up, but there's currently no information in there.

COMPLETED TASKS 6/16/16

1. Added link to APA Div 12 Bipolar Disorder page
2. Changed language on CMRS wiki page to reflect parent and teacher versions of measure
3. Added information about the 10-item brief parent version of the CMRS
4. Added information about psychometric properties of CMRS
5. Added references

Mike says this: A score of 5 or more items on the parent version yielded a sensitivity of 0.72 and specificity of 0.81, which were superior to self and attributional versions.

OTHER IDEAS:

Survey

Please fill out this short survey about your experience at this edit-a-thon.