

Y-BOCS Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · August 2026 · Reproduces no items, checklist content, anchors, or forms

The Y-BOCS is a clinician-rated OCD severity scale: ten items scored 0 to 4, obsession and compulsion subtotals of 0 to 20, total 0 to 40 for the past week (second edition 0 to 5 per item, total 0 to 50). It rates severity, never diagnoses, is licensed intellectual property, and is required by no authority. Defensible charting names the version and mode, keeps the checklist and targets as the referent, reports the total with subtotals, names any band's framework, states change with its definition, and documents function and avoidance separately.

Version and mode original 0-40 / II 0-50 / CY-BOCS

Do: name the edition, clinician interview vs self-report vs parent report, rater, informants, past-week window, interval.

Pitfall: a Y-BOCS-II read against 0-40 bands; a self-report total spliced into a clinician series.

Checklist, targets, then severity content before ratings

Do: checklist and target list at intake; targets reviewed and updated at follow-up; current content areas in your own words.

Pitfall: a severity number with no symptoms behind it.

Total with both subtotals obsessions x/20, compulsions x/20, total x/40

Do: report all three with denominators; the checklist never enters the total.

Pitfall: "Y-BOCS 20" with no denominator, subtotals, or edition.

Bands named by framework three non-equivalent systems

Do: legacy original bands (0-7 / 8-15 / 16-23 / 24-31 / 32-40), 2022 empirical original bands (0-13 / 14-21 / 22-29 / 30-40), or 2025 second-edition bands (0-14 / 15-21 / 22-34 / 35-50); raw score governs.

Pitfall: "28, severe OCD" with no framework; "0-7 means no OCD"; 16 as a diagnostic cutoff.

Change with its definition % reduction = (baseline - current) / baseline

Do: baseline date and score, current, points and percent; name the convention: 2016 consensus full response = 35%+ with CGI-I 1-2 for a week; partial = 25% to under 35% with CGI-I 3 or better; remission = criteria no longer met, or 12 or less with CGI-S 1-2.

Pitfall: "36%, responder" with no CGI; remission from a percentage; 25% called "more conservative."

Function, avoidance, insight, accommodation separately, every time

Do: work, school, relationships, self-care; avoided settings; covert rituals; reassurance; family accommodation; insight.

Pitfall: a falling total read as restored function.

Decision link, without item text the number changes something

Do: ERP targets, response prevention, medication, level of care, or diagnostic reassessment; scores and interpretation only, no prompts or forms in the note.

Pitfall: a number filed with no consequence; item wording pasted into a template.

Before the note is signed

- ☐ Version, mode, rater, and past-week window named
- ☐ Targets reviewed; content areas recorded in own words
- ☐ Total charted with both subtotals and denominators
- ☐ Band, if used, named with its framework; raw score governs
- ☐ Change stated as points and percent with the definition and CGI anchor
- ☐ Function, avoidance, insight, and accommodation documented separately
- ☐ Decision link recorded; no item text in the note

Drafting with AI

Give it the facts: version and mode, targets, subtotals and total, baseline and current with dates, CGI, function and avoidance, insight, medication status, plan.

"Draft Y-BOCS documentation: original version, clinician-administered; today 11/20 + 9/20 = 20/40; baseline 07/01 28/40; CGI-I 3 for two weeks; kitchen avoidance persists; partner reassurance taper; next Y-BOCS at session 13."

Never paste patient-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

0 to 40

obsessions 0-20 + compulsions
0-20

Three band systems

legacy, 2022 empirical, II (0-50)

35% + CGI-I 1-2

2016 consensus response, one
week

Licensed

paper needs permission; digital
needs a license

Y-BOCS Documentation Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements. Contains no scale content.

Setting: _____ Patient (initials): _____ Date: _____ Clinician: _____

Version + mode + rating window: _____ Assessment interval + informants: _____

Symptom targets

Checklist reviewed at intake / targets updated today · current content areas in own words · covert rituals · reassurance seeking

Scores

Obsessions ___/20 · compulsions ___/20 · total ___/40 (or ___/50 for the second edition) · band with its framework named · not a diagnosis

Change and classification

Baseline date and score · points and % reduction · CGI-I / CGI-S · duration sustained · definition invoked (2016 consensus / protocol / numerical only)

Function and avoidance

Work, school, relationships, self-care · avoided settings · delegated tasks · family accommodation

Insight and clinical context

Insight (separate from the total) · comorbidity, medication status, adherence · discrepancies between score and observed function

Decision link

ERP targets or hierarchy change · response-prevention focus · medication plan · level-of-care rationale · diagnostic reassessment if score and function diverge

Next administration and record

Date · same version and mode · scores entered in the outcome-measure record · no item text stored · permission held

Clinician (name and credentials): _____ Signature: _____ Date: _____