SYNTHETIC EXAMPLE

SCOFF

SCOFF - synthetic example

CLIENT
John Doe

ADMINISTERED
Example date

RESPONSE MODE
Self-report

TOTAL

1 / 5

DEMO SYNTHETIC



1/5

What this report lays out

- Source instrument: SCOFF
- Item count: 5 items
- Response format: No, Yes
- Respondent: Patient

CLINICIAN REVIEW REQUIRED

This document demonstrates Lirena's report design using fictional data. It does not represent a scored SCOFF result, cannot establish a diagnosis, and must not be placed in a clinical record.

SCOFF does not diagnose anorexia, bulimia, or binge-eating disorder. A negative screen does not rule out an eating disorder.

A report designed for clinical review

Synthetic SCOFF example. The gauges and rows use this instrument's groups and range. They are not a client record.

REVIEW

The person answers five yes or no questions. Positive screens require fuller eating-disorder assessment and medical/safeguarding review where relevant. This page does not collect those answers.

CONTEXT

One point for every yes. SCOFF is designed to raise suspicion of a likely case rather than to diagnose (Morgan, Reid and Lacey, 1999). The implemented range is 0 to 5. Lirena's implemented cutoff is 2.

BOUNDARY

SCOFF does not diagnose anorexia, bulimia, or binge-eating disorder. A negative screen does not rule out an eating disorder.

REPORT PRINCIPLE

Show the evidence, the version, and the boundary. Leave diagnosis and formulation with the clinician.

SCOFF response pattern

Synthetic responses for SCOFF. The table uses this instrument's groups and range. It is not a client record and does not reproduce official item wording.

ITEM	GROUP	SYNTHETIC RESPONSE
1	Total	No
2	Total	Yes
3	Total	No
4	Total	Yes
5	Total	No

Synthetic SCOFF values only. Not a client record.

Source-led by design

Lirena separates published methodology, product implementation, and clinical approval. A citation does not by itself authorize administration or prove a software scoring rule.

INSTRUMENT

SCOFF is a very brief screen used to flag possible eating-disorder concerns for further assessment. It does not measure medical instability, BMI, or compensatory behaviour in detail.

ADMINISTRATION

The person answers five yes or no questions. Positive screens require fuller eating-disorder assessment and medical/safeguarding review where relevant. This page does not collect those answers.

CLINICAL BOUNDARY

SCOFF does not diagnose anorexia, bulimia, or binge-eating disorder. A negative screen does not rule out an eating disorder.

METHODOLOGY

One point for every yes. SCOFF is designed to raise suspicion of a likely case rather than to diagnose (Morgan, Reid and Lacey, 1999). The implemented range is 0 to 5. Lirena's implemented cutoff is 2.

SELECTED REFERENCES

1. Original SCOFF paper

Morgan JF, Reid F, Lacey JH. The SCOFF questionnaire: assessment of a new screening tool for eating disorders. BMJ. 1999;319(7223):1467-1468.

2. Scoring source Lirena follows

Source URL recorded on the Lirena scoring verification input.