



The American College of Psychiatrists

2023-2024 Psychiatry Resident In-Training Examination[®] (PRITE[®]) Annotated Content Outline



This document provides the current PRITE content outline with annotated remarks. This document is organized by major content area. Each content area can be accessed by clicking on the area of interest from the Table of Contents.

This guide can be used to facilitate item writing in the content area by providing item writers with additional information specific to each content area. In addition to the annotated content area information, this content outline also provides a mapping of the respective milestone(s) to each content area.

Note that the annotations and milestones listed below are suggestions to guide question writing. They may not be the only valid options. Since this exam is a cognitive assessment, in general, the MK milestones are the most appropriate. All items must have one milestone; and a maximum of two per item.



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Domain/Subdomain	Items
A. Clinical Neurosciences	MK3 all subheadings
Emphasis on basic science, structure & processes, general, not related to specific disorders/pathology.	
A.1 Neurodevelopment (across the lifespan)	MK3 & MK1
A.2 Neuroanatomy	MK3
A.3 Neurophysiology: Cells and Circuits	MK3 & MK1
<ul style="list-style-type: none"> Recognized circuits with clinical relevance Neurotransmitters and receptors Modulators (hormones, inflammatory responses) Neurobiological basis of basic behaviors (e.g., appetite, sleep, sex, aggression, attachment, attention, pain and pleasure) 	
A.4 Genetics	MK3
A.4.a Types of genetic abnormalities <ul style="list-style-type: none"> Mechanisms, not clinical syndromes (e.g., <i>trinucleotide repeats, translocations, etc.</i>) 	MK3
A.4.b Methods to identify genes and genetic disorders	MK3
A.4.c Epigenetics <ul style="list-style-type: none"> Non-DNA factors including gene expression 	MK3



Domain/Subdomain	Items
B. Clinical Neurology	MK3 all subheadings
B.1 Diagnostic procedures	MK3
B.1.a Neurological interview and examination <ul style="list-style-type: none"> How to conduct a neuro interview and exam in general (e.g., how to assess for apraxia) 	MK3
B.1.b Neuroimaging <ul style="list-style-type: none"> Structural and functional 	MK3
B.1.c Neurophysiological testing for neurological evaluation <ul style="list-style-type: none"> EEG, evoked potentials, sleep studies 	MK3
B.2 Diagnostic and clinical evaluation of neurologic disorders/syndromes	MK3 & MK2
B.2.a Common neurological disorders/syndromes	MK3 & MK2
B.2.b Comorbid psychiatric disorders associated with neurological disorders/syndromes	MK3 & MK2
B.3 Management and treatment of neurological disorders/syndromes	MK3 & MK2



C. Clinical Psychiatry	
C.1 Development and Maturation across the Lifespan	MK1 all subheadings
<p>Growth and development, relationship to functioning at various stages, changes and growth relevant to clinical assessment and treatment; clinical vignettes useful; avoid name that theory/name that age</p>	
C.1.a Physical (other than neurodevelopmental)	MK1
C.1.b Cognitive/Language	MK1
C.1.c Psychological/Emotional/Personality	MK1
C.1.d Social	MK1
C.1.e Sexual	MK1
<p>C.1.f Environmental influences</p> <ul style="list-style-type: none"> Ethnic, cultural, family, social, spiritual influences 	MK1
<p>C.1.g Life transitions</p> <ul style="list-style-type: none"> Becoming an adult, becoming a parent, change in relationship status, getting or losing a job, gender transitions, role transitions, aging, death 	MK1



C. Clinical Psychiatry	
C.2 Behavioral and Social Sciences	MK4 all Subheadings
May overlap with other areas	
C.2.a Psychology	MK4
C.2.a.1 Behavioral/Cognitive psychology <ul style="list-style-type: none"> Includes behavioral, cognitive, and cognitive-behavioral theory 	MK4
C.2.a.2 Neuropsychology/Learning theory	MK4
C.2.a.3 Psychoanalytic/Psychodynamic theory <ul style="list-style-type: none"> Avoid questions that simply match names with theories – should test for understanding of significance and meaning) 	MK4
C.2.a.4 Social psychology/Sociology/Anthropology/Ethnology <ul style="list-style-type: none"> Includes social factors influencing attitudes and behaviors (e.g., bias and prejudice, as well as theories of group/family organization and dynamics) Sociology Anthropology and Ethnology (incl. religion, spirituality, culture, includes cross-cultural factors important for clinical practice) 	MK4
C.2.b Other behavioral/social sciences	MK4



C. Clinical Psychiatry	
C.3 Epidemiology	MK2 all Subheadings
Avoid questions where answers may vary over time such as prevalence of substance use. The epidemiology of specific disorders goes in C5. Focus on methodology and statistics essential to understanding research reports	
C.3.a Core concepts and major research studies	MK2
C.3.b Prevention/Risk Factors/Resilience/Protective factors <ul style="list-style-type: none"> • Primary, secondary, tertiary; examples and clinical vignettes useful • Risk Factors (General risk factors rather than risk for a particular disorder) • Resilience/ Protective factors (General protective factors rather than risk for a particular disorder) 	MK2
C.3.c Other epidemiology	MK2



C. Clinical Psychiatry	
C.4 Diagnostic Procedures	MK2 all Subheadings
Where appropriate, ask questions specific to different age groups, e.g., children, adolescents, elderly or special populations	
C.4.a Interview	MK2
C.4.b Mental Status <ul style="list-style-type: none"> • All aspects of formal MSE including differences for specific age groups and special populations 	MK2
C.4.c Diagnostic assessments and rating scales <ul style="list-style-type: none"> • Test for understanding clinical relevance of specific instruments 	MK2
C.4.d Psychological/Neuropsychological testing	MK2
C.4.e Laboratory testing/Monitoring <ul style="list-style-type: none"> • Test for understanding and clinical relevance of specific tests 	MK2
C.4.f Imaging	MK2 & MK3
C.4.g Neurophysiological testing	MK2 & MK3
C.4.g.1 EEG	MK2 & MK3
C.4.g.2 EMG	MK2 & MK3
C.4.g.3 Sleep	MK2 & MK3
C.4.h Other diagnostic procedures	MK2 & MK3



C. Clinical Psychiatry	
C.5 Psychopathology and Associated Conditions Across the Lifespan	MK2 all Subheadings
Clinical vignettes useful, differential diagnosis, contributing factors and characteristics, comorbidity but not indicated treatment	
C.5.a Disorders (includes substance-, medication-, medical condition-induced)	MK2
C.5.a.1 Neurodevelopmental	MK2
C.5.a.2 Schizophrenia spectrum and other psychotic disorders	MK2
C.5.a.3 Bipolar and related disorders	MK2
C.5.a.4 Depressive disorders	MK2
C.5.a.5 Anxiety disorders	MK2
C.5.a.6 Obsessive-compulsive and related disorders	MK2
C.5.a.7 Trauma and stressor-related disorders	MK2
C.5.a.8 Dissociative disorders	MK2
C.5.a.9 Somatic symptom and related disorders (may include pain syndrome)	MK2
C.5.a.10 Feeding and eating disorders	MK2
C.5.a.11 Elimination disorders	MK2
C.5.a.12 Sleep-wake disorders	MK2
C.5.a.13 Sexual dysfunctions	MK2
C.5.a.14 Gender dysphoria	MK2
C.5.a.15 Disruptive/Impulse control/Conduct disorders	MK2
C.5.a.16 Substance-related and addictive disorders	MK2
C.5.a.17 Neurocognitive disorders	MK2
C.5.a.18 Personality disorders	MK2
C.5.a.19 Paraphilic disorders	MK2



C. Clinical Psychiatry	
C.5 Psychopathology and Associated Conditions Across the Lifespan	MK2 all Subheadings
C.5.a.20 Reproductive Psychopathology <ul style="list-style-type: none"> • Premenstrual, perinatal, perimenopausal disorders, as experienced by all genders) 	MK2
C.5.a.21 Other mental disorders	MK2
C.5.b High Risk Behaviors	MK2
May overlap with other areas, especially psychopathology; identification and management of these types of behaviors; characteristics of affected individuals; significance of these behaviors for diagnosis, treatment response, outcome; lifespan and various patient populations; clinical vignettes useful	MK2
C.5.b.1 Suicidality/Self-injurious behavior	MK2
C.5.b.2 Aggression/Interpersonal violence and homicide/Social aggression (gangs, terrorism)	MK2
C.5.c Environmental factors <ul style="list-style-type: none"> • Family/Social/ Education/ Employment/ Housing/ Financial/Legal/ Health; impact and relationship of environmental factors to functioning and psychopathology. • Clinical vignettes useful • Avoid listing of statistics 	MK2



C. Clinical Psychiatry	
C.6 Treatment across the Lifespan	MK2 all Subheadings
Should include questions relevant to specific age groups and special populations	
C.6.a Patient Engagement: The Therapeutic Alliance and the Physician/Patient Relationship <ul style="list-style-type: none"> Clinical vignettes preferred, when possible, not ethical issues 	MK2 & PC4
C.6.b Case Formulation/Differential Diagnosis/Treatment Planning <ul style="list-style-type: none"> Should focus on clinical reasoning and integration of data from multiple domains, e.g., the biopsychosocial formulation Treatment Planning should focus on factors related to selecting specific treatment(s) based upon diagnostic formulation and other considerations, e.g., access to care, systems of care, cost-effectiveness 	MK2
C.6.c Management of difficult patients and nonadherence to treatment <ul style="list-style-type: none"> Preferable to use clinical vignettes 	MK2
C.6.d Somatic Therapies	MK2 & PC5
C.6.d.1 Psychopharmacology	MK2 & PC5
C.6.d.1.a Pharmacokinetics/Pharmacodynamics <ul style="list-style-type: none"> Clinical vignettes encouraged 	MK2 & PC5
C.6.d.1.b Drug Interactions	MK2 & PC5
C.6.d.1.c Age/Gender/Racial issues <ul style="list-style-type: none"> Pharmacokinetic/dynamic factors specific to different age, gender and racial groups 	MK2 & PC5
C.6.d.1.d Pharmacogenomics	MK2 & PC5
For categories below, focus on mechanisms of action, indications, selection, side effects etc.; NOT differential dx. Use generic names of medications.	



C. Clinical Psychiatry	
C.6 Treatment across the Lifespan	MK2 all Subheadings
C.6.d.1.e Antipsychotics	MK2
C.6.d.1.f Antidepressants	MK2
C.6.d.1.g Antianxiety/Sedative-hypnotics	MK2
C.6.d.1.h Mood stabilizers	MK2
C.6.d.1.i Cognitive enhancers	MK2
C.6.d.1.j Psychostimulants	MK2
C.6.d.1.k Medications to treat substance use	MK2
C.6.d.1.l Reproductive Treatment Issues <ul style="list-style-type: none"> • PMDD, pregnancy, aging-related phenomena, lactation, perimenopause as relevant to all genders 	MK2
C.6.d.1.m Augmentation agents <ul style="list-style-type: none"> • Applies to all augmentation strategies for all medications and all diagnoses 	MK2
C.6.d.1.n Medications for side effects	MK2
C.6.d.1.o Adverse medication effects	MK2
C.6.d.1.p Other psychopharmacology (e.g. medications for addiction)	MK2
C.6.e Other somatic therapies	MK2 & PC5
C.6.e.1 Neuromodulation <ul style="list-style-type: none"> • ECT, TMS, Neurosurgery, Vagal nerve stimulation, Deep brain stimulation, Biofeedback) 	MK2 & PC5
C.6.e.2 Phototherapy/Chronotherapy	MK2 & PC5



C. Clinical Psychiatry	
C.6 Treatment across the Lifespan	MK2 all Subheadings
C.6.e.3 Complementary/Alternative medicine	MK2
C.6.e.4 Other somatic therapies	MK2
C.6.f Psychotherapy and Psychoeducational Interventions <i>Where appropriate, should cover full range of age groups and other special populations; should emphasize treatments that have evidence supporting effectiveness and efficacy, taking into account that a wide range of therapies are considered clinically relevant</i>	MK2 & MK4
C.6.f.1 Supportive	MK2 & MK4
C.6.f.2 Behavioral/Dialectical Behavioral	MK2 & MK4
C.6.f.3 Cognitive/Cognitive-Behavioral	MK2 & MK4
C.6.f.4 Interpersonal	MK2 & MK4
C.6.f.5 Dyadic <ul style="list-style-type: none"> • Includes couples tx. parent-child tx 	MK2 & MK4
C.6.f.6 Psychoeducation (<i>including parenting</i>)	MK2 & MK4
C.6.f.7 Psychodynamic/Psychoanalytic	MK2 & MK4
C.6.f.8 Family	MK2 & MK4
C.6.f.9 Group	MK2 & MK4
C.6.f.10 Motivational Interviewing	MK2 & MK4
C.6.f.11 Other Psychotherapy/Psychoeducational interventions	MK2 & MK4



C. Clinical Psychiatry	
C.6 Treatment across the Lifespan	MK2 all Subheadings
C.6.g Psychosocial/Milieu Treatments <ul style="list-style-type: none"> Indication for and management of treatment interventions; clinical vignettes useful; focus on patient/disorder characteristics for various interventions, unique aspects of interventions, role of psychiatrist; cover lifespan/different patient populations; should include rationale for selections of various interventions 	MK2 & SBP2
C.6.g.1 Rehabilitation/Relapse prevention/Harm reduction; Self-Help/Peer Support Programs; Case Management	MK2 & SBP2
C.6.g.2 Inpatient/Residential; Partial/Day Rx; In-home/Community-Based services	MK2 & SBP2
C.6.g.3 Outpatient	MK2 & SBP2
C.6.g.4 Emergency/Crisis Interventions/Seclusion/Restraints	MK2 & SBP2
C.6.g.5 Other Psychosocial/Milieu treatments	MK2 & SBP2



C. Clinical Psychiatry	
C.7 Consultation and Collaborative-Integrated Care	PC6, SBP2 all Subheadings
<p>Applies to patient care issues in consultative systems and models; does not cover questions of specific diagnoses (5a) or treatments including pain, medication, interactions (6d), etc. Clinical vignettes useful; focus on the role of the psychiatrist in each setting</p>	
<p>C.7.a Medical</p> <ul style="list-style-type: none"> • Focus on the role of the psychiatrist in medical settings 	PC6 & SBP2
<p>C.7.b Court/Justice system</p> <ul style="list-style-type: none"> • Psychiatric consultation to the courts. Avoid name that case 	PC6 & SBP2
<p>C.7.c Community Mental Health</p> <ul style="list-style-type: none"> • Community mental health-based care 	PC6 & SBP2
<p>C.7.d School</p> <ul style="list-style-type: none"> • May include basic questions about educational law 	PC6 & SBP2
<p>C.7.e Other consultation</p> <ul style="list-style-type: none"> • Religious organizations, • patient advocacy organizations, • employment-based services 	PC6 & SBP2



C.8 Issues in Practice	
C.8.a Quality improvement/Patient safety/Risk management/Use of Technology	
<ul style="list-style-type: none"> Quality Assurance/Improvement Patient Safety Risk Management (Different QA approaches; hospital patient safety goals; Root cause analyses, when to notify, incident reporting) Clinical vignettes useful 	SBP1
<ul style="list-style-type: none"> Use of Technology (refers to use by an individual in practice) Does not include EMR, electronic billing, e-mailing, texting, internet, etc. NOT professionalism concerns (see 8b) 	SBP3
<ul style="list-style-type: none"> Teaching and education (includes teaching patient/family groups as well as colleagues) Advocacy (Advocating on behalf of patients, organizations and the profession to insurance carriers, other professionals, government, etc.) 	SBP3
<ul style="list-style-type: none"> Self-assessment and lifelong learning (Maintenance of certification, etc.) 	PBL1 & PBL2
C.8.b Ethics/Professionalism	
<ul style="list-style-type: none"> Clinical (professionalism issues in practice (e.g., billing, CPT codes, working with insurance, etc.) Research/Scholarly Activity (the ethics of conducting research, writing up case reports, etc.) Organizational & Administrative (ethical issues in systems of care, leadership, accrediting bodies, etc.) 	PROF1 & PROF2
C.8.c Forensics/Legal issues	
<ul style="list-style-type: none"> As they apply to practice (mandated reporting requirements, landmark case precedents that impact clinical care) Avoid 'name that case' Emphasize key content of important cases 	PROF1, PROF2, PC6
C.8.d History of psychiatry	
<ul style="list-style-type: none"> Avoid name recognition questions Focus on landmark thinkers, specific contributions Avoid 'name that case' Emphasize key content of important cases 	PROF1, PROF2, & SBP3
C.8.e Other issues in practice	
	PROF1 & PROF2



C.9 Research and Scholarship Literacy	PBL1 all subheadings
<p>C.9.a Research design/Methods</p> <ul style="list-style-type: none"> • Study design 	PBL1
<p>C.9.b Accessing/Evaluating/Applying evidence to practice</p> <ul style="list-style-type: none"> • Validity, reliability, generalizability, etc. 	PBL1
<p>C.9.c Statistics</p> <ul style="list-style-type: none"> • Core concepts, e.g., NNT 	PBL1



C.10 Administration and Systems	SBP2, SBP3 all Subheadings
<p>Structures, organization, processes, and policies that govern the delivery of psychiatric care in various settings, impact functioning of psychiatrically ill individuals, determine type and extent of services available, control/manage information collection and dissemination. Should be relevant to psychiatry and cover the lifespan as well as different populations.</p>	
<p>C.10.a Administration</p> <ul style="list-style-type: none"> • Public Policy • Information Management and Electronic Medical Record • Organizational theory and structure • Health Care Economics • Other administration duties 	SBP2 & SBP3
<p>C.10.b Systems</p> <ul style="list-style-type: none"> • Including Community, Justice, educational and other systems • Global • Other 	SBP2 & SBP3