

# Amen Clinic

## Anxiety and Depression Type Questionnaire

Name: \_\_\_\_\_

Please rate yourself on each of the symptoms listed below using the following scale. If possible, to give us the most complete picture, have another person who knows you well (such as a spouse, partner or parent) rate you as well. List other person \_\_\_\_\_

0	1	2	3	4	N/A
Never	Rarely	Occasionally	Frequently	Very Frequently	Not Applicable/Not Known

Other    Self

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Frequent feeling of nervousness or anxiety  |
| _____ | _____ | 2. Panic attacks   |
| _____ | _____ | 3. Avoidance places because of fear of having an anxiety attack  |
| _____ | _____ | 4. Symptoms of heightened muscle tension (headache, sore muscles, hand tremor)   |
| _____ | _____ | 5. Periods of heart pounding, nausea or dizziness  |
| _____ | _____ | 6. Tendency to predict the worst   |
| _____ | _____ | 7. Multiple persistent fears or phobias (such as dying, doing something crazy)   |
| _____ | _____ | 8. Conflict avoidance  |
| _____ | _____ | 9. Excessive fear of being judged or scrutinized by others   |
| _____ | _____ | 10. Quick startle or tendency to freeze in anxiety provoking or intense situations   |
| _____ | _____ | 11. Seems shy, timid and easily embarrassed  |
| _____ | _____ | 12. Bites fingernails or picks skin  |
| _____ | _____ | 13. Persistent sad, or “empty” mood  |
| _____ | _____ | 14. Loss of interest or pleasure in activities that are usually fun, including sex   |
| _____ | _____ | 15. Restlessness, irritability, or excessive crying  |
| _____ | _____ | 16. Feelings of guilt, worthlessness, helplessness, hopelessness, pessimism  |
| _____ | _____ | 17. Sleeping to much or too little, early-morning awakening  |
| _____ | _____ | 18. Appetite and/or weight loss or overeating and weight gain  |
| _____ | _____ | 19. Decreased energy, fatigue, feeling “slowed down”   |
| _____ | _____ | 20. Thoughts of death or suicide, or suicide attempts  |
| _____ | _____ | 21. Difficulty concentrating, remembering, or making decisions   |
| _____ | _____ | 22. Persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders,<br>And chronic pain |
| _____ | _____ | 23. Persistent negativity or chronic low self-esteem   |
| _____ | _____ | 24. Persistent feeling of being dissatisfied or bored  |
| _____ | _____ | 25. Excessive or senseless worrying  |
| _____ | _____ | 26. Upset when things are out of place or things don’t go the way you planned  |
| _____ | _____ | 27. Tendency to be oppositional or argumentative   |
| _____ | _____ | 28. Tendency to have repetitive negative or anxious thoughts   |
| _____ | _____ | 29. Tendency toward compulsive behaviors   |
| _____ | _____ | 30. Intense dislike for change   |
| _____ | _____ | 31. Tendency to hold grudges   |
| _____ | _____ | 32. Difficulties seeing options in situations  |
| _____ | _____ | 33. Tendency to hold on to own opinion and not list to others  |
| _____ | _____ | 34. Needing to have things done a certain way or you become very upset   |
| _____ | _____ | 35. Others complain that you worry too much  |

- \_\_\_\_\_ 36. Tend to say no without first thinking about question
- \_\_\_\_\_ 37. Periods of abnormally elevated, depressed, or anxious mood
- \_\_\_\_\_ 38. Periods of decreased need for sleep, feel energetic on dramatically less sleep than usual
- \_\_\_\_\_ 39. Periods of grandiose notions
- \_\_\_\_\_ 40. Periods of increased talking or pressured speech
- \_\_\_\_\_ 41. Periods of too many thoughts racing through the mind
- \_\_\_\_\_ 42. Periods of markedly increased energy
- \_\_\_\_\_ 43. Periods of poor judgment that leads to risk-taking behavior (separate from usual behavior)
- \_\_\_\_\_ 44. Periods of inappropriate social behavior
- \_\_\_\_\_ 45. Periods of irritability or aggression
- \_\_\_\_\_ 46. Periods of delusional or psychotic thinking
- \_\_\_\_\_ 47. Periods of rage with little provocation
- \_\_\_\_\_ 48. Periods of rage with little provocation
- \_\_\_\_\_ 49. Often misinterprets comments as negative when they are not
- \_\_\_\_\_ 50. Periods of spaciness or confusion
- \_\_\_\_\_ 51. Periods of panic and/or fear for no specific reason
- \_\_\_\_\_ 52. Visual or auditory changes, such as seeing shadows or hearing muffled sounds
- \_\_\_\_\_ 53. Frequent periods of déjà vu (feeling of being somewhere you have never been)
- \_\_\_\_\_ 54. Sensitivity or mild paranoia
- \_\_\_\_\_ 55. Headaches or abdominal pain of uncertain origin
- \_\_\_\_\_ 56. History of a head injury or family history of violence or explosiveness
- \_\_\_\_\_ 57. Dark thoughts, may involve suicidal or homicidal thoughts
- \_\_\_\_\_ 58. Periods of forgetfulness or memory problems
- \_\_\_\_\_ 59. Trouble staying focused
- \_\_\_\_\_ 60. Spaciness or feeling in a fog
- \_\_\_\_\_ 61. Overwhelmed by tasks of daily living
- \_\_\_\_\_ 62. Feels tired, sluggish, or slow moving
- \_\_\_\_\_ 63. Procrastination, failure to finish things
- \_\_\_\_\_ 64. Chronic boredom
- \_\_\_\_\_ 65. Loses things
- \_\_\_\_\_ 66. Loses things
- \_\_\_\_\_ 67. Forgetful
- \_\_\_\_\_ 68. Poor planning skills
- \_\_\_\_\_ 69. Difficulty expressing feelings
- \_\_\_\_\_ 70. Difficulty expressing empathy for others