

**GAD-7: Anxiety Scale**

Over the last two weeks, how often have you been bothered by the following problems?				
	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous or anxious, or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3
Total Score " _____ "				
If you checked off any problem, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?				
Circle one	Not difficult at all	Somewhat difficult	Very difficult	Extremely difficult

Score:

5 to 9 = mid anxiety

10 to 14 = moderate anxiety

15 to 21 = severe anxiety

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