

General Symptom Checklist

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 the other person _____. Please place a star by your most concerning symptoms.

0	1	2	3	4	NA
Never	Rarely	Occasionally	Frequently	Very Frequently	Not Applicable

Other Self

- | | | |
|-------|-------|--|
| _____ | _____ | 1. Feeling depressed or being in a sad mood |
| _____ | _____ | 2. Having a decreased interest in things that are usually fun |
| _____ | _____ | 3. Experiencing a significant change in weight or appetite, increased or decreased |
| _____ | _____ | 4. Having recurrent thoughts of death or suicide |
| _____ | _____ | 5. Experiencing sleep changes, such as a lack of sleep or a marked increase in sleep |
| _____ | _____ | 6. Feeling physically agitated or easily irritated |
| _____ | _____ | 7. Having feelings of low energy or tiredness |
| _____ | _____ | 8. Having feelings of worthlessness, helplessness, hopelessness or guilt |
| _____ | _____ | 9. Experiencing decreased concentration or memory |
| _____ | _____ | 10. Having periods of an elevated, high or irritable mood |
| _____ | _____ | 11. Having periods of a very high self-esteem or grandiose thinking |
| _____ | _____ | 12. Having periods of decreased need for sleep without feeling tired |
| _____ | _____ | 13. Being more talkative than usual or feeling pressure to keep talking |
| _____ | _____ | 14. Having racing thoughts or frequently jumping from one subject to another |
| _____ | _____ | 15. Being easily distracted by irrelevant things |
| _____ | _____ | 16. Having a marked increase in activity level |
| _____ | _____ | 17. Excessive involvement in pleasurable activities that have the potential for painful consequences (e.g., spending money, sexual indiscretions, gambling, foolish business ventures) |
| _____ | _____ | 18. Experiencing panic attacks, which are periods of intense, unexpected fear |
| _____ | _____ | 19. Having periods of trouble breathing or feeling smothered |
| _____ | _____ | 20. Having periods of feeling dizzy, faint or unsteady on your feet |
| _____ | _____ | 21. Having periods of heart pounding or rapid heart rate |
| _____ | _____ | 22. Having periods of trembling or shaking |
| _____ | _____ | 23. Having periods of sweating |
| _____ | _____ | 24. Having periods of nausea or abdominal discomfort/trouble |
| _____ | _____ | 25. Having feelings of a situation "not being real" or feeling as if you are in a movie |
| _____ | _____ | 26. Experiencing numbness or tingling sensations |
| _____ | _____ | 27. Experiencing hot or cold flashes |
| _____ | _____ | 28. Having periods of chest pain or discomfort |
| _____ | _____ | 29. Fearing death |
| _____ | _____ | 30. Fearing going crazy or doing something out-of-control |
| _____ | _____ | 31. Avoiding everyday places for 1) fear of having a panic attack or 2) needing to go with other people in order to feel comfortable |
| _____ | _____ | 32. Excessive fear of being judged by others, which causes you to avoid or get anxious in situations |
| _____ | _____ | 33. Experiencing persistent, excessive phobia (heights, closed spaces, specific animals, etc.) |
| _____ | _____ | 34. Having recurrent bothersome thoughts, ideas, or images that you try to ignore |
| _____ | _____ | 35. Having trouble getting "stuck" on certain thoughts, or having the same thought over and over |
| _____ | _____ | 36. Experiencing excessive worrying which feel irrational |
| _____ | _____ | 37. Others complaining that you worry too much or get "stuck" on the same thoughts |
| _____ | _____ | 38. Having compulsive behaviors that you must do or else you feel very anxious, such as excessive hand washing, checking locks, or counting or spelling |

- ___ 39. Needing to have things done a certain way or else you become very upset
- ___ 40. Others complaining that you do the same thing over and over to an excessive degree
- ___ 41. Experiencing recurrent and upsetting thoughts of a past traumatic event
- ___ 42. Experiencing recurrent distressing dreams of a past upsetting event
- ___ 43. Feeling detached or distant from others
- ___ 44. Feeling numb or restricted in your feelings
- ___ 45. Feeling that your future is shortened
- ___ 46. Being quick to startle
- ___ 47. Feeling like you're always watching for bad things to happen
- ___ 48. Being markedly more irritable or experiencing anger outbursts
- ___ 49. Having unrealistic or excessive worry in at least a couple areas of your life
- ___ 50. Trembling, twitching, or feeling shaky
- ___ 51. Experiencing muscle tension, aches, or soreness
- ___ 52. Having trouble sustaining attention or being easily distracted
- ___ 53. Experiencing difficulty completing or initiating projects
- ___ 54. Feeling overwhelmed by the tasks of everyday living
- ___ 55. Having trouble maintaining an organized work or living area
- ___ 56. Being inconsistent in work performance
- ___ 57. Lacking in attention to detail
- ___ 58. Making decisions impulsively
- ___ 59. Having difficulty delaying what you want, having to have your needs met immediately
- ___ 60. Feeling restless and/or fidgety
- ___ 61. Making comments to others without considering their impact
- ___ 62. Being impatient and/or easily frustrated
- ___ 63. Experiencing frequent traffic violations or near accidents
- ___ 64. Refusing to maintain body weight above a level that most people consider healthy
- ___ 65. Intensely fearing gaining weight or becoming fat even though underweight
- ___ 66. Feeling of lack of control over eating behavior
- ___ 67. Being overly concerned with body shape and/or weight
- ___ 68. Experiencing involuntary physical movements and/or motor tics (such as eye blinking, shoulder shrugging, head jerking or picking).
- ___ 69. Having delusional or bizarre thoughts (thoughts you know others would think are false)
- ___ 70. Seeing objects, shadows or movements that are not real
- ___ 71. Hearing voices or sounds that are not real
- ___ 72. Experiencing periods of time where your thoughts or speech were disjointed or didn't make sense to you or others
- ___ 73. Feeling socially isolated or withdrawn
- ___ 74. Having a severely impaired ability to function at home or at work
- ___ 75. Lacking personal hygiene or grooming
- ___ 76. Having a marked lack of initiative
- ___ 77. Having frequent feelings that someone or something is out to hurt you or discredit you
- ___ 78. Snoring loudly (or others complaining about your snoring)
- ___ 79. Others saying that you stop breathing when you sleep