GAD-7

Namo		
ivaiiie	 	

## Over the last 2 weeks, how often have you been bothered by the following problems?

(Use x to indicate your answer)	Not at all	Several days	More than half the days	Nearly every day
Feeling nervous, anxious or on edge	0	1	2	3
Not being able to stop or control worrying	0	1	2	3
Worrying too much about different things	0	1	2	3
Trouble relaxing	0	1	2	3
Being so restless that it is hard to sit still	0	1	2	3
Becoming easily annoyed or irritable	0	1	2	3
Feeling afraid as if something awful might happen	0	1	2	3

Scores of 5, 10, and 15 represent cut points for mild, moderate, and severe anxiety, respectively.

## **PHQ-9 Depression**

Over the <u>last 2 weeks</u> , how often have you been bothered by any of the following problems?  (Use "\sum " to indicate your answer"	N o t a t all	Sev eral day s	More than half the day	N e arly ever y day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless.	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself — or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television.	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving .around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

**Scores** of 5, 10, 15, and 20 represent cut off points for mild, moderate, moderately severe and severe depression, respectively