1325 Airmotive Way, Suite 100 Reno, Nevada 89502 Tele: 775.453.4143



GAD-7

Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems?	Not at all	Several days	More than half the days	Nearly every day
(Use "✔" to indicate your answer)				
1. Feeling nervous, 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
 Feeling afraid as if something awful might happen 	0	1	2	3

(For office coding: Total Score T____ = ___ + ___ + ____)

Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. No permission required to reproduce, translate, display or distribute.

Score of 5, 10, and 15 indicates Mild, Moderate, and Severe Anxiety