Mathers Clinic Sheehan Patient Rated Anxiety Scale

Name:	Date:

During the past week, how much did you suffer from ... (Check only one answer for each question)

	Not At All	A Little	Moderately	Quite A Bit	Extremely
Difficulty in getting your breath, smothering, or over breathing	0	0	0	0	0
Choking sensation or lump in throat	0	0	0	0	0
Skipping, racing, or pounding of your heart	0	0	0	0	0
Chest pain, pressure, or discomfort	0	0	0	0	0
Bouts of excessive sweating	0	0	0	0	0
-aintness, light-headedness, or dizzy spells	0	0	0	0	0
Sensation of rubbery or "jelly" legs	0	0	0	0	0
eeling off balance or unsteady like you might fall	0	0	0	0	0
Nausea or stomach problems	0	0	0	0	0
eeling that things around you are strange, unreal, foggy, or detached from you	0	0	0	0	0
Feeling outside or detached from part or all of your body, or a floating feeling	0	0	0	0	0
ingling or numbness in pans of your body	0	0	0	0	0
Hot flashes or cold chills	0	0	0	0	0
Shaking or trembling	0	0	0	0	0
Having a fear that you are dying or that something terrible is about to happen	0	0	0	0	0
Feeling you are losing control or going insane	0	0	0	0	0
Sudden anxiety attacks with three or more of the symptoms (listed above) hat occur when you are in or about to go into a situation that is likely, from your experience, to bring on an attack	0	0	0	0	0
Sudden unexpected anxiety attacks with three or more symptoms (listed above) that occur with little or no provocation (ie., when you are NOT in a situation that is likely, from your experience, to bring on an attack)	0	0	0	0	0



Crystal Lake: 145 S Virginia St, Crystal Lake, IL 60014 Woodstock: 715 W Judd St, Woodstock, IL 60098 Elgin: 420 Airport Rd, Ste C, Elgin, IL 60123 Fox Lake: 101 Towne Centre Ln, Fox Lake, IL 60020 phone: 815.444.9999 phone: 815.444.9999 phone: 847.462.6099 phone: 224.908.3005 fax: **815.986.1363** fax: **815.986.1363** fax: **847.628.6064** fax: **847.531.1296**

	Not At All	A Little	Moderately	Quite A Bit	Extremely
Sudden unexpected spells with only one or two symptoms (listed above) that occur with little or no provocation (ie., when you are NOT in a situation that is likely, from your experience, to bring on an attack)	0	0	0	0	0
Anxiety episodes that build up as you anticipate doing something that is likely, from your experience, to bring on anxiety that is more intense than most people experience in such situations	0	0	0	0	0
Avoiding situations because they frighten you	0	0	0	0	0
Being dependent on others	0	0	0	0	0
Tension and inability to relax	0	0	0	0	0
Anxiety, nervousness, restlessness	0	0	0	0	0
Spells of increased sensitivity to sound, light, or touch	0	0	0	0	0
Attacks of diarrhea	0	0	0	0	0
Worrying about your health too much	0	0	0	0	0
Feeling tired, weak, and exhausted easily	0	0	0	0	0
Headaches or pains in neck or head	0	0	0	0	0
Difficulty in falling asleep	0	0	0	0	0
Waking in the middle of the night, or restless sleep	0	0	0	0	0
Unexpected waves of depression occurring with little or no provocation	0	0	0	0	0
Emotions and moods going up and down a lot in response to changes around you	0	0	0	0	0
Recurrent and persistent ideas, thoughts, impulses, or images that are intrusive, unwanted, senseless, or repugnant	0	0	0	0	0
Having to repeat the same action in a ritual, e.g. checking, washing, counting repeatedly, when it's not really necessary	0	0	0	0	0

Mathers Clinic Sheehan Patient Rated Anxiety Scale

Name:	Date:		
MATHERS CLINIC TheMathersClinic.com	Crystal Lake: 145 S Virginia St, Crystal Lake, IL 60014 Woodstock: 715 W Judd St, Woodstock, IL 60098 Elgin: 420 Airport Rd, Ste C, Elgin, IL 60123 Fox Lake: 101 Towne Centre Ln, Fox Lake, IL 60020	phone: 815.444.9999 phone: 815.444.9999 phone: 847.462.6099 phone: 224.908.3005	fax: 815.986.1363 fax: 815.986.1363 fax: 847.628.6064 fax: 847.531.1296