

Improving lives with psychotherapy, mindfulness and Neurofeedback Helping: ADHD, Anxiety, Depression, Pain, Sleep, Stress, Brain Injury and more



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Anxiety Symptom Checklist

0 N	0 Not at all				A little 2 Sometimes 3 Often 4 Always
0	1	2	3	4	A. Excessive anxiety and worry, occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
0	1	2	3	4	B. Difficulty controlling the worry.
0	1	2	3	4	C. The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms pre- sent for more days than not for the past 6 months). Note: Only one item is required in children.
0	1	2	3	4	(1) restlessness or feeling keyed up or on edge
0	1	2	3	4	(2) being easily fatigued
0	1	2	3	4	(3) difficulty concentrating or mind going blank
0	1	2	3	4	(4) irritability
0	1	2	3	4	(4) muscle tension
0	1	2	3	4	(5) sleep disturbance (difficulty falling or staying asleep, or restless unsatisfying sleep)