

# Anxiety Assessment

These assessments will help you and your provider gain a better understanding of your symptoms, monitor your progress, and make informed adjustments to your treatment.

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

1. Feeling nervous, anxious or on edge?

- Not at all
- Several days
- More than half the days
- Nearly every day

2. Not being able to stop or control worrying?

- Not at all
- Several days
- More than half the days
- Nearly every day

3. Worrying too much about different things?

- Not at all
- Several days
- More than half the days
- Nearly every day

4. Trouble relaxing?

- Not at all
- Several days
- More than half the days
- Nearly every day

5. Being so restless that it is hard to sit still?

- Not at all
- Several days
- More than half the days
- Nearly every day

6. Becoming easily annoyed or irritable?

- Not at all
- Several days
- More than half the days
- Nearly every day

7. Feeling afraid as if something awful might happen?

- Not at all
- Several days
- More than half the days
- Nearly every day



If you have an emergency and require immediate help, dial 988 for the Suicide and Crisis Lifeline National Helpline, or dial 911.