## **Anxiety Screening Tool**

Name:l	Date: _	/	/	
Choose the <u>one</u> description for each item th have been bothered by each of the following			•	<b>y days</b> you
	None	Several	7 or more	Nearly every day
Feeling nervous, anxious, or on edge				
Unable to stop worrying				
Worrying too much about different things				
Problems relaxing				
Feeling restless or unable to sit still				
Feeling irritable or easily annoyed				
Being afraid that something awful might happen				
Scoring: Sum scores from each question:  • None = 0  • Several = 1  • 7 or more = 2  • Nearly every day = 3				
Total score:				
• A total score of 5–9 suggests mild anx	ciety.			

PDF available at: www.AAFPlearninglink.org. Challenging Issues in Chronic Pain Management.

• A total score of  $\ge 10$  suggests moderate-severe anxiety.

With permission from: Marcus DA. Chronic Pain. *A Primary Care Guide to Practical Management*, 2nd edition, HumanaPress, Totowa, NJ, 2008. An adaptation of the General Anxiety Disorder-7 (GAD-7). The GAD-7 is a 7-item, self-report, anxiety screening tool, which was developed and validated by Spitzer and colleagues for use in primary care. [Spitzer RL, et al. A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7. *Arch Intern Med.* 2006;166:1092-1097.]

