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GAD-7 Scale

Generalized Anxiety Disorder 7-item Scale (GAD-7)

Patient Name:

Date of Visit:

Client Questions

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

1. Feeling nervous, anxious, or on edge:
2. Not being able to stop or control worrying:
3. Worrying too much about different things:
4. Trouble relaxing:
5. Being so restless that it's hard to sit still:
6. Becoming easily annoyed or irritable:
7. Feeling afraid as if something awful might happen:

Questionnaire Score

Add up the all the numbers for answers 1-7 above.

Total Score:

10. If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home, or get along with other people?: