## GAD-7

| CAD-7 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Over the last 2 weeks, how often have you been bothered by the following problems? <br> (Use " $\boldsymbol{\nu}$ " to indicate your answer) | Not at all | Several days | More than half the days | Nearly every day |
| 1. Feeling nervous, anxious or on edge | 0 | 1 | 2 | 3 |
| 2. Not being able to stop or control worrying | 0 | 1 | 2 | 3 |
| 3. Worrying too much about different things | 0 | 1 | 2 | 3 |
| 4. Trouble relaxing | 0 | 1 | 2 | 3 |
| 5. Being so restless that it is hard to sit still | 0 | 1 | 2 | 3 |
| 6. Becoming easily annoyed or irritable | 0 | 1 | 2 | 3 |
| 7. Feeling afraid as if something awful might happen | 0 | 1 | 2 | 3 |
|  | : 0 <br> core: |  |  |  |

## How to Score and Interpret the Results?

Add the scores for each column to arrive at the total score. Next, you can interpret the results. For example, if your total score is 12 , your anxiety is considered moderate. We recommend that you use this scale routinely to keep track of your treatment outcomes, and discuss your progress, or lack thereof, with your therapist.

| Score | Anxiety Severity |
| :---: | :--- |
| $0-4$ | None-Minimal |
| $5-9$ | Mild |
| $10-14$ | Moderate |
| $15-21$ | Severe |

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