

Name \_\_\_\_\_

Date \_\_\_\_\_

Please check the one response to each item that best describes you for the past seven days (except for items 6 and 7 which are for the past two weeks).

### 1. Falling Asleep:

\_\_\_\_\_ I never take longer than 30 minutes to fall asleep.

\_\_\_\_\_ I take at least 30 minutes to fall asleep, less than half the time.

\_\_\_\_\_ I take at least 30 minutes to fall asleep, more than half the time.

\_\_\_\_\_ I take more than 60 minutes to fall asleep, more than half the time.

### 2. Sleep during the night:

\_\_\_\_\_ I do not wake up at night.

\_\_\_\_\_ I have a restless, light sleep with few awakenings.

\_\_\_\_\_ I wake up at least once a night, but go back to sleep easily.

\_\_\_\_\_ I awaken more than once a night and stay awake for 20 minutes or more, more than half the time.

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### 3. Waking up too early:

\_\_\_\_\_ Most of the time, I awaken no more than 30 minutes before I need to get up.

\_\_\_\_\_ More than half the time, I awaken more than 30 minutes before I need to.

\_\_\_\_\_ I awaken at least one hour before I need to, more than half the time.

\_\_\_\_\_ I awaken at least two hours before I need to, more than half the time.

#### 4. Sleeping too much:

\_\_\_\_\_ I sleep no longer than 7-8 hours a night with out napping during the day.

\_\_\_\_\_ I sleep no longer than 10 hours in a 24 hour period (including naps).

\_\_\_\_\_ I sleep no longer than 12 hours in a 24 hour period (including naps).

\_\_\_\_\_ I sleep longer than 12 hours in a 24 hour period (including naps).

#### 5. Feeling Sad:

\_\_\_\_\_ I do not feel sad.

\_\_\_\_\_ I feel sad less than half the time.

\_\_\_\_\_ I feel sad more than half the time.

\_\_\_\_\_ I feel sad nearly all of the time.

#### 6. Decreased appetite (within the last two weeks):

\_\_\_\_\_ There is no change in my usual appetite.

\_\_\_\_\_ I eat somewhat less often and/or lesser amounts than usual.

\_\_\_\_\_ I eat much less than usual and only with personal effort.

\_\_\_\_\_ I eat rarely within a 24-hour period, and only with extreme personal effort or with persuasion by others.

### 7. Increased Appetite (within the last two weeks):

- There is no change from my usual appetite.
- I feel a need to eat more frequently than usual.
- I regularly eat more often and/or greater amounts than usual.
- I feel driven to overeat both at mealtimes and between meals.

### 8. Decreased weight (within the last two weeks):

- I have not had a change in my weight.
- I feel as if some slight weight loss occurred.
- I have lost 2 pounds or more.
- I have lost 5 pounds or more.

### 9. Increased weight change (within the last two weeks):

- I have not had a change in my weight.
- I feel as if I have had a slight weight gain.
- I have gained 2 pounds or more.
- I have gained 5 pounds or more.

### 10. Concentration/Decision-making:

- \_\_\_\_\_ There is no change in my usual capacity to concentrate or make decisions.
- \_\_\_\_\_ I occasionally feel indecisive or find that my attention often wanders.
- \_\_\_\_\_ Most of the time I struggle to focus my attention or make decisions.
- \_\_\_\_\_ I cannot concentrate well enough to read or cannot make even minor decisions.

### 11. View of Myself:

- \_\_\_\_\_ I see myself as equally worthwhile and deserving as other people.
- \_\_\_\_\_ I am more self-blaming than usual.
- \_\_\_\_\_ I largely believe that I cause problems for others.
- \_\_\_\_\_ I ruminate over major and minor defects in myself.

### 12. Thoughts of death and suicide:

- \_\_\_\_\_ I do not think of suicide or death.
- \_\_\_\_\_ I feel that life is empty or wonder if it's worth living.
- \_\_\_\_\_ I think of suicide/death several times a week for several minutes.
- \_\_\_\_\_ I think of suicide or death several times a day in some detail or I have made specific plans for suicide or have actually tried to take my life.

### 13. General Interest:

- \_\_\_\_\_ There is no change from my usual level of interest in other people or activities.
- \_\_\_\_\_ I notice I am less interested in people or activities.

\_\_\_\_\_ I find I have interest in only one or two of my formerly pursued interests.

\_\_\_\_\_ I have virtually no interest in formerly pursued activities.

#### 14. Energy Level

\_\_\_\_\_ There is no change in my usual level of energy.

\_\_\_\_\_ I get tired more easily than usual.

\_\_\_\_\_ I have to make a big effort to start or finish my usual daily activities (for example shopping, homework, cooking, or going to work).

\_\_\_\_\_ I really cannot carry out most of usual daily activities due to a lack of energy.

#### 15. Feeling slowed down:

\_\_\_\_\_ I think, speak, and move at my usual rate of speed.

\_\_\_\_\_ I notice that my thinking is slowed down or my voice sounds dull or flat.

\_\_\_\_\_ It takes several seconds to respond to most questions, and I am sure my thinking has slowed.

\_\_\_\_\_ I am often unable to respond to questions without extreme effort.

#### 16. Feeling restless:

\_\_\_\_\_ I do not feel restless.

\_\_\_\_\_ I'm often fidgety, wringing my hands ,or need to shift how I am sitting.

\_\_\_\_\_ I have an impulse to move about and am quite restless.

\_\_\_\_\_ At times I am unable to stay seated and need to pace around.