

Yes___ No___

Client's Name_____ Date of Birth___/___/___ Today's Date___/___/___

Your Symptoms Checklist (Please Check All That Apply – Comment on the Back)

Depressive Symptoms (lasting at least 2 weeks or more)

- Sadness or Uncontrollable Crying Spells
- Irritable Mood
- Difficulty Concentrating / indecision
- Insomnia
- Sleeping too much
- Weight Loss (when not dieting)
- Weight Gain
- Feeling Sad or Empty
- Depressed Mood
- Feelings of Excessive Guilt
- Excessive Tiredness / Lethargy
- Sadness or Uncontrollable Crying Spells
- Lack of Enjoyment / Apathy
- Lack of Motivation
- Feelings of Worthlessness
- Thoughts of Death
(accidental or *wishing I never was born*)
- Suicidal/Homicidal Thoughts (without plan)
- Suicidal/Homicidal Thoughts (with plan and intent)
- Previous suicide attempt
- Family History of Suicide

Anxiety Symptoms

- excessive / uncontrollable worry
- feeling on edge or keyed up
- feelings of panic / panic attack
- fear of going out (due to anxiety of panic attack)
- re-experiencing or reliving traumatic event
- distressing memories or nightmares
- feeling numb, unreal, or as if detached from one's body
- easily startled or exaggerated startle response
- avoiding situations that remind you of a traumatic event

Manic Symptoms

- Elevated mood (feeling very up / euphoric)
- Marked Irritability / Angry Mood
- Frequent Mood Swings
- Excessive Energy
- Decreased Need for Sleep (feels rested with almost no sleep)
- Excessive Risk Taking (with high potential for self-harm)
- More Talkative than Usual
- Rapid or Pressured Speech
- Racing Thoughts
- Poor Judgment / Impulsivity
- Excessive Spending / Buying Sprees / Max out Credit Cards
- Increase in Goal Directed Behavior (sex, drugs, alcohol)
- Grandiose or Delusional Thinking

Impulse Control Problems

- Explosive or Violent Temper
- Compulsive Use of Pornography/Sexual Behavior
- Compulsive Gambling
- Compulsive Spending
- Compulsive Stealing
- Compulsive Hair Pulling

Obsessive-Compulsive Behaviors

- Repetitive /unwanted thoughts that you try to suppress with another thought or action
- Repetitive behavior such as excessive hand washing, checking, ordering, repeating words, or praying to suppress an unwanted thought or fear
- Have thoughts that bother you and can't get rid of regardless what you do
- Check things over and over to excess
- Straighten, order, or tidy things so much that it interferes with daily living
- Worry excessively about acting / speaking more aggressively than you should
- Have great difficulty discarding things even if they have no value
- Tendency to keep things extremely clean or wash hands excessively

Attention-Deficit / Hyperactivity Disorder

- _____ (adults) Childhood history of ADHD that was diagnosed or later concluded due to the symptoms of behavioral problems at school, impulsivity, temper outbursts, and lack of concentration.
- _____ Unable to concentrate or pay attention to things of low interest, even when those things are important to your life.
- _____ Often fails to give close attention to details or make careless mistakes in work or other activities
- _____ Often has difficulty sustaining attention in tasks
- _____ Often does not seem to listen when spoken to directly
- _____ Often does not follow through on instructions and fails to finish duties in the workplace
- _____ Often has difficulty organizing tasks and activities
- _____ Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort
- _____ Often loses things necessary for tasks or activities
- _____ Disorganized in most areas of his/her life
- _____ Often easily distracted by extraneous stimuli
- _____ Often forgetful in daily activities
- _____ Often restless and fidgety; unable to be sedentary for more than a short period of time
- _____ Impulsive; has an easily observable pattern of acting first and thinking later
- _____ Often experiences feelings of restlessness in situations in which it is inappropriate
- _____ Often has difficulty engaging in leisure activities quietly
- _____ "Often on the go" or often acts as if "driven by a motor"
- _____ Often talks excessively
- _____ Often blurts out answers before questions have been completed
- _____ Often has difficulty awaiting turn
- _____ Often interrupts or intrudes on others
- _____ Has a "low boiling point and a short fuse"
- _____ Exhibits low stress tolerance, is easily frustrated or upset
- _____ (Adults) Tendency toward addictive behaviors
- _____ Starts many projects, but rarely finishes any

Oppositional Defiant Disorder

- _____ Displays a pattern of negativistic, hostile, and defiant behavior toward adults or authority figures.
- _____ Often acts as if parents, teachers, and other authority figures are the "enemy"
- _____ Erupts in temper tantrums (e.g., screaming, crying, throwing objects, thrashing on the ground, or refusal to move) in defiance of direction from an adult caregiver.
- _____ Consistently argues with adults
- _____ Often defies or refuses to comply with reasonable requests and rules
- _____ Deliberately annoys people and is easily annoyed by others
- _____ Often blames others for own mistakes or misbehavior
- _____ Consistently is angry or vindictive
- _____ Has experienced significant impairment in social, academic, or occupational functioning

Conduct Disorder / Delinquency

- _____ Persistent refusal to comply with rules or expectations in the home, school, or community
- _____ Excessive fighting, intimidation of others, cruelty or violence toward people or animals, and destruction of property
- _____ History of stealing at home, at school, or in the community
- _____ School adjustment characterized by disrespectful attitude toward authority figures, frequent disruptive behaviors, and detentions or suspensions for misbehavior
- _____ Repeated conflict with authority figures at home, at school, or in the community
- _____ Impulsivity as manifested by poor judgment, taking inappropriate risks, and failing to stop and think about consequences of actions
- _____ Numerous attempts to deceive others through lying, conning, or manipulating
- _____ Consistent failure to accept responsibility for misbehavior accompanied by a pattern of blaming others
- _____ Little or no remorse for misbehavior
- _____ Lack of sensitivity to the thoughts, feelings, and needs of other people

- Multiple sexual partners, lack of emotional commitment, and engaging in unsafe sexual practices
- Use of mood-altering substances on a regular basis
- Participation in gang membership and activities

Anger Management Problems

- History of explosive aggressive outbursts out of proportion to any precipitating stressors, leading to assaultive or destruction of property.
- Over-reactive hostility to insignificant irritants
- Swift and harsh judgment statements made to or about others
- Body language of tense muscles (e.g., clenched fist or jaw) glaring looks, or refusal to make eye contact
- Use of passive-aggressive patterns (e.g., social withdrawal, lack of complete or timely compliance in following directions or rules, complaining about authority figures behind their backs, nonparticipation in meeting expected behavioral norms) due to anger.
- Expressions of anger that include threats, destroying property, breaking objects, invading other's personal space, and refusing to speak to others (who they are mad at).
- Intimidation and use of coercion to get one's way
- Hostile, aggressive behavior that alienates friends, family, neighbors, and others
- Expressions of anger that are perceived by others as demeaning, threatening, or disrespectful
- Use of abusive language

Marital / Couples Conflict

- Marital difficulties lead to arguments, causing ongoing erosion of the marital and family relationship
- Partners are alienated from each other, which places tension on the family unit.
- Frequent or continual arguing with partner
- Lack of communication with partner
- A pattern of angry projection of responsibility for the conflicts onto the partner.
- Involvement in multiple intimate relationships at the same time.
- Physical and/or verbal abuse in a relationship
- A pattern of superficial or no communication, infrequent or no sexual contact, excessive involvement in activities (work or recreation) that allows for avoidance of closeness to the partner.
- A pattern of repeated broken, conflicted relationships due to personal deficiencies in problem solving, maintaining a trust relationship, or choosing abusive or dysfunctional partners.
- Talk of separation sparks fears and concern among various family members, causing them to compensate in various ways (e.g., parentification or overindulgence).
- Parents decide to separate, giving rise to questions about which family members stay or leave the home.
- Children are in a loyalty conflict over being separated from one parent and from their siblings
- Parents decide to separate and/or divorce, but remain under the same roof, which contributes to coldness and estrangement in the home.
- Financial difficulties arise as the result of operating two separate households and this restricts family members' amenities.
- Symptoms of anxiety, depression, or acting-out behaviors (substance use, poor school performance, etc) develop in family members.
- Child management problems develop as a result of single parenting and lack of support from ex-spouse.
- Children assume some responsibility and guilt for the marital failure.

Eating Disorder

- Rapid consumption of large quantities of food in a short period of time followed by self-induced vomiting and/or the use of laxatives due to the fear of weight gain.
- Extreme weight loss (and amenorrhea in females) with refusal to maintain a minimal healthy weight due to very limited ingestion of food and high frequency of secretive, self-induced vomiting, inappropriate use of laxatives, and/or excessive strenuous exercise.
- Preoccupation with body image related to a grossly unrealistic assessment of self as being too fat or a strong denial of seeing self as emaciated.
- Irrational fear of becoming overweight.
- Fluid and electrolyte imbalance.
- Threat to life due to inadequate nutrition, fluid and electrolyte imbalance, and a general weakening of body systems resulting from behavioral eating disorder.

Psychoticism

- Bizarre thought content (delusions of grandeur, persecution, reference, influence, control, somatic sensations, or infidelity)
- Illogical form of thought or speech (loose association of ideas in speech; incoherence; illogical thinking; vague, abstract, or repetitive speech; neologisms; perseverations; clanging)
- Perception disturbance (hallucinations, primarily auditory but occasionally visual or olfactory)
- Disturbed affect (blunted, none, flattened, or inappropriate)
- Lost sense of self (loss of ego boundaries, lack of identity, blatant confusion)
- Diminished volition (inadequate interest, drive, or ability to follow a course of action to its logical conclusion; pronounced ambivalence or cessation of goal-directed activity)
- Relationship withdrawal (withdrawal from involvement with the external world and preoccupation with egocentric ideas and fantasies; alienation feelings)
- Poor social skills (misinterpretation of the actions or motives of others; maintaining emotional distance from others; feeling awkward and threatened in most social situations; embarrassment of others by failure to recognize the impact of own behavior)
- Inadequate social control over sexual, aggressive, or frightened thoughts, feelings, or impulses (blatantly sexual or aggressive fantasies; fears of impending doom; acting out sexual or aggressive impulses in an unpredictable and unusual manner, often directed toward family and friends)
- Psychomotor abnormalities (a marked decrease in reactivity to the environment; various catatonic patterns such as stupor, rigidity, excitement, posturing, or negativism; unusual mannerisms or grimacing)

Sexual Abuse

- Vague memories of inappropriate childhood sexual contact that can corroborated by significant others.
- Self-report of being sexually abused with clear, detailed memories.
- Inability to recall years of childhood
- Extreme difficulty becoming intimate with others
- Inability to enjoy sexual contact with a desired partner
- Unexplainable feelings of anger, rage, or fear when coming into contact with a close family relative
- Pervasive pattern of promiscuity or the sexualization of relationships.

Posttraumatic Stress Disorder (PTSD)

- Exposure to threats of death or serious injury, or subjection to actual injury, that resulted in an intense emotional response of fear, helplessness or horror
- Intrusive, distressing thoughts or images that recall the traumatic event
- Disturbing dreams associated with the traumatic event
- A sense that the event is recurring, as in illusions or flashbacks
- Intense distress when exposed to reminders of the traumatic event
- Physiological reactivity when exposed to internal or external cues that symbolize the traumatic event
- Avoidance of activity, places, or people associated with traumatic event
- Avoidance of thoughts, feelings, or conversations about the traumatic event
- Inability to recall some important aspect of the traumatic event
- Lack of interest and participation in formerly meaningful activities
- A sense of detachment from others

- Inability to experience the full range of emotions, including love
- A pessimistic, fatalistic attitude regarding the future
- Sleep disturbance
- Irritability or angry outbursts
- Lack of concentration
- Hypervigilance or feeling on edge
- Exaggerated startle response
- Symptoms have been present form more than one month

Grief / Loss Unresolved

- Thoughts dominated by loss coupled with poor concentration, crying spells, and confusion about the future.
- Serial losses in life (i.e., deaths, divorces, jobs) that led to depression and discouragement
- Strong emotional response exhibited when losses are discussed
- Lack of appetite, weight loss, and/or insomnia as well as other depression signs that occurred since the loss
- Feelings of guilt that not enough was done for the lost significant other, or an unreasonable belief of having contributed to the death of the significant other
- Avoidance of talking on anything more than a superficial level about the loss
- Loss of a positive support network due to a geographic move

Low Self-Esteem

- Inability to accept compliments
- Makes self-disparaging remarks; sees self as unattractive, worthless, a loser, a burden, unimportant; takes blame easily.
- Lack of pride in grooming
- Difficulty in saying no to others; assumes not being liked by others.
- Fear of rejection of others; especially peer group
- Lack of any goals for life and setting of inappropriately low goals for self
- Uncomfortable in social situations, especially larger groups

Type A Behavior

- A pattern of pressuring self and others to accomplish more because there is never enough time
- A spirit of intense competition in all activities
- Intense compulsion to win at all costs regardless of the activity or co-competitor
- Inclination to dominate all social or business situations, being too direct and overbearing
- Propensity to become irritated by the action of others who do not conform to own sense of propriety or correctness
- A state of perpetual impatience with any waiting, delays, or interruptions.
- Difficulty in sitting and quietly relaxing or reflecting
- Psychomotor facial signs of intensity and pressure (e.g., muscle tension, scowling, glaring, or tics)
- Psychomotor voice signs (e.g., irritatingly forceful speech or laughter, rapid and intense speech, and frequent use of obscenities)

Vocational Stress

- Feelings of anxiety and depression secondary to interpersonal conflict (perceived feelings of inadequacy, fear, and failure) secondary to severe business losses
- Fear of failure secondary to success or promotion that increases perceived expectations for greater success
- Rebellion against and/or conflicts with authority figures in their job
- Feelings of anxiety and depression secondary to being fired or laid off, resulting in unemployment
- Anxiety related to perceived or actual job jeopardy
- Feelings of depression and anxiety related to complaints of job dissatisfaction or the stress of employment responsibilities.

Chemical / Alcohol Dependence

- Self-report of almost daily use of alcohol or illicit drugs or regularly using until intoxicated
- Consistent use of alcohol or other mood-altering drugs until high, intoxicated, or passed out.
- Amnesic blackouts occur when abusing alcohol.
- Inability to stop or cut down use of mood-altering drug one started, despite the verbalized desire to do so and the negative consequences continued use brings.
- Blood work that reflects the results of a pattern of heavy substance use (e.g., elevated liver enzymes)
- Denial that chemical dependence is a problem despite direct feedback from spouse, relatives, and employers that the use of the substance is negatively affecting them and others.
- Increased tolerance for the drug as evidenced by the need to use more to become intoxicated or to attain the desired effect.
- Changing peer groups / friends to one that is noticeably oriented toward regular use of alcohol and/or illicit drugs
- Suspension of important social, recreational, or occupational activities because they interfere with using the mood-altering drug.
- Drug paraphernalia and/or alcohol found in client's possession or in his/her personal area (e.g., bedroom, car, etc)
- Marked change in behavior (e.g., isolation or withdrawal from family and close friends, loss of interest in activities, low energy, sleeping more)
- Physical withdrawal symptoms (shaking, seizures, nausea, headaches, sweating, anxiety, insomnia, and / or depression).
- Continued substance / alcohol use despite persistent physical, legal, financial, vocational, social, or relationship problems that are directly caused by the substance/ alcohol use.
- Frequent Mood swings
- Problems at work / school due to excessive absenteeism, lateness
- Poor self-image as evidenced by describing self as a loser or a failure, and rarely making eye contact when talking to others.
- Predominantly negative or hostile outlook on life and other people.
- Has been arrested for possession, driving under the influence, or drunk and disorderly charges.
- Positive family history of chemical / alcohol dependence.

<input type="checkbox"/> C	Have you ever felt that you should Cut down on your drinking?
<input type="checkbox"/> A	Have people Annoyed you by criticizing your drinking?
<input type="checkbox"/> G	Have you ever felt bad or Guilty about your drinking?
<input type="checkbox"/> E	Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover? (Eye-opener)