# GAD-7 Anxiety Questionnaire

Over the last two weeks, how often have you been bothered by the following problems?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not at all | Several days | More than half the days | Nearly every day |
| 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 is hard to sit still |  |  |  |  |
| 6. Becoming easily annoyed or irritable |  |  |  |  |
| 7. Feeling afraid, as if something awful might happen |  |  |  |  |