# Appendix 8.2

## GAD-7*

**Name**: _____     **Date**: _____

Over the last two weeks, how often have you been bothered by any of the following problems?
(*Use "✓" to indicate your answer*)

| | Not at all (0) | Several days (1) | More than half of the days (2) | Nearly every day (3) |
|---|---|---|---|---|
| 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 | | | | |

Add columns: [ ] [ ] [ ]

(Healthcare professional: For interpretation of TOTAL, please refer to accompanying scoring card)     TOTAL: [ ]

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

Not difficult at all          _____
Somewhat difficult          _____
Very difficult               _____
Extremely difficult          _____

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Spitzer RL, Kroenke K, Williams JB, et al. A brief measure for assessing generalised anxiety disorder: the GAD-7. *Archives of Internal Medicine*. 2006;166:1092-1097.

## How to Score the GAD-7

Anxiety severity is calculated by assigning scores of 0, 1, 2, and 3, to the response categories of "not at all," "several days," "more than half the days," and "nearly every day," respectively. GAD-7 total score for the seven items ranges from 0 to 21. Scores of 5, 10, and 15 represent cut points for mild, moderate, and severe anxiety, respectively.

## Guide for Interpreting GAD-7 Scores

| Score | Interpretation |
|---|---|
| 0 - 4 | Normal. |
| 5 - 9 | Mild anxiety. |
| 10 - 14 | Moderate anxiety. |
| 15 - 21 | Severe anxiety. |

* When screening for an anxiety disorder, a recommended cut point for further evaluation is a score of 10 or greater.

## Using the GAD-7 to Screen for GAD and Other Anxiety Disorders

A score of 10 or greater is the recommended cut point for identifying cases in which a formal diagnosis of GAD may be considered. Elevated GAD-7 scores also raise the possibility that one or more of the other most common anxiety disorders may be present (e.g., panic disorder, PTSD and social phobia).

## Functional Health Assessment

The instrument also includes a functional health assessment. This asks the patient how emotional difficulties or problems impact work, things at home, or relationships with other people. Patient responses can be one of four: Not difficult at all, Somewhat difficult, Very difficult, Extremely difficult. The last two responses suggest that the patient's functionality is impaired. After treatment begins, functional status and number score can be measured to assess patient improvement.

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