

Patient Name: _____ DOB: _____ Date of Visit: _____

Severity Measure for Generalized Anxiety Disorder—Child Age 11–17

Name: _____ DOB: _____ Sex: Male Female Date: _____

Instructions: The following questions ask about thoughts, feelings, and behaviors, often tied to concerns about family, health, finances, school, and work. **Please respond to each item by marking (✓ or x) one box per row.**

							Clinician Use
	<u>During the PAST 7 DAYS, I have...</u>	Never	Occasionally	Half of the	Most of the time	All of the	Item score
1.	felt moments of sudden terror, fear, or fright	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
2.	felt anxious, worried, or nervous	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
3.	had thoughts of bad things happening, such as family tragedy, ill health, loss of a job, or accidents	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
4.	felt a racing heart, sweaty, trouble breathing, faint, or shaky	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
5.	felt tense muscles, felt on edge or restless, or had trouble relaxing or trouble sleeping	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
6.	avoided, or did not approach or enter, situations about which I worry	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
7.	left situations early or participated only minimally due to worries	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
8.	spent lots of time making decisions, putting off making decisions, or preparing for situations, due to worries	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
9.	sought reassurance from others due to worries	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
10.	needed help to cope with anxiety (e.g., alcohol or medication, superstitious objects, or other people)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	
Total/Partial Raw Score:							
Prorated Total Raw Score: (if 1-2 items left unanswered)							
Average Total Score:							

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Scoring and Interpretation

1. Sum raw scores on the 10 items to obtain a **total raw score**.
2. Transpose the **total raw score** to an **average total score, used for screen interpretation**:
 - This is done by **dividing the raw total score by number of items in the measure (10)**.
3. The **average total score** reduces the interpretable results to a 5-point scale.

Interpreting the Score:

Average total Score	Interpretation
0	None
1	Mild
2	Moderate
3	Severe
4	Extreme

Instructions to Clinicians

The Severity Measure for Generalized Anxiety Disorder—Child Age 11–17 is a 10-item measure that assesses the severity of generalized anxiety disorder in children and adolescents. The measure was designed to be completed by the child upon receiving a diagnosis of generalized anxiety disorder (or clinically significant generalized anxiety disorder symptoms) and thereafter, prior to follow-up visits with the clinician. Each item asks the child to rate the severity of his or her generalized anxiety disorder **during the past 7 days**.

Frequency of Use

To track changes in the severity of the child’s generalized anxiety disorder over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the child’s symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the child that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.