

# Stress Symptom Checklist

Source: *The Anxiety and Phobia Workbook* by Edmund J. Bourne, Ph.D.

**Instructions:** Check each item that describes a symptom you have experienced to any significant degree during the last month. Then, total the number of items checked.

## Physical Symptoms

- Headaches [migraine or tension]
- Backaches
- Tight muscles
- Neck and shoulder pain
- Jaw tension
- Muscle cramps, spasms
- Nervous stomach
- Other pain
- Nausea
- Insomnia [sleeping poorly]
- Fatigue, lack of energy
- Cold hands and/or feet
- Tightness or pressure in the head
- High blood pressure
- Diarrhea
- Skin condition [e.g., rash]
- Allergies
- Teeth grinding
- Digestive upsets [cramps, bloating]
- Heart beats rapidly or pounds, even at rest
- Stomach pain or ulcer
- Constipation
- Hypoglycemia
- Appetite change
- Colds
- Profuse perspiration
- Overeating
- Weight change
- When nervous, use of alcohol, cigarettes, or recreational drugs

## Psychological Symptoms

- Anxiety
- Depression
- Confusion or “spaciness”
- Irrational fears
- Compulsive behavior
- Forgetfulness
- Feeling “overloaded” or overwhelmed
- Hyperactivity; feeling you can’t slow down
- Mood swings
- Loneliness
- Problems with relationships
- Dissatisfied/unhappy with work
- Difficult concentrating
- Frequent irritability
- Restlessness
- Frequent boredom
- Frequent worrying or obsessing
- Frequent guilt
- Temper flare-ups
- Crying spells
- Nightmares
- Apathy
- Sexual problems

**Total Number of Items Checked:** \_\_\_\_\_

**Evaluate your stress level as follows:**

### Number of Items Checked

0-7

8-14

15-21

22+

### Stress Level

Low

Moderate

High

Very High