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| *Participant number: Session number:* |
| **Please read each statement and circle a number 0, 1, 2 or 3 which indicates how much the statement applied to you *over the past week*. There are no right or wrong answers. Do not spend too much time on any statement.**  |
| ***The rating scale is as follows:*** 0 Did not apply to me at all 1 Applied to me to some degree, or some of the time 2 Applied to me to a considerable degree, or a good part of time 3 Applied to me very much, or most of the time 1. I found it hard to wind down 0 1 2 32. I was aware of dryness of my mouth 0 1 2 33. I couldn’t seem to experience any positive feelings at all 0 1 2 34. I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion) 0 1 2 35. I found it difficult to work up the initiative to do things 0 1 2 36. I tended to over-react to situations 0 1 2 37. I experienced trembling (eg, in the hands) 0 1 2 38. I felt that I was using a lot of nervous energy 0 1 2 39. I was worried about the situations in which I might panic and make a fool of myself 0 1 2 310. I felt that I had nothing to look forward to 0 1 2 311. I found myself getting agitated 0 1 2 312. I found it difficult to relax 0 1 2 313. I felt down-hearted and blue 0 1 2 314. I was intolerant of anything that kept me from getting on with what I was doing 0 1 2 315. I felt I was close to panic 0 1 2 316. I was unable to become enthusiastic about anything 0 1 2 317. I felt I wasn’t worth much as a person 0 1 2 318. I felt that I was rather touchy 0 1 2 319. I was aware of the actions of my heart in the absence of physical exertion (eg, sense of heart rate increase, heart missing a beat) 0 1 2 320. I felt scared without any good reason 0 1 2 321. I felt that life was meaningless 0 1 2 3 |