Outcome Questionnaire (OQ®-45.2)	Name:	_ Date:		/	Sometimes	s Frequently	Almost Always
			_	_	_	_	_

Instructions:

Looking back over the last week, including today, help us understand how you have been feeling. Read each item carefully and fill the circle completely under the category which best describes your current situation. For this questionnaire, work is defined as employment, school, housework, volunteer work, and so forth.

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	Never	Rarely	Sometimes	Frequently	Always
1. I get along well with others. 2. I tire quickly	0000000	0 0 0 0 0 0 0 0 0	000000000	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0
going. (If you do not drink, mark "never") 12. I find my work/school satisfying	0000000000000	00000000000000	00000000000000	0000000000000	0 0 0 0 0 0 0 0 0 0 0 0 0
27. I have an upset stomach	0 0 0 0 0	0 0 0 0 0	0 0 0 0	0 0 0 0 0	0 0 0 0 0
(If not applicable, mark "never") 33. I feel that something bad is going to happen	0	0 0 0	0 0 0	0 0 0	0 0 0
subways, and so forth. 36. I feel nervous	0000000	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0