**Stress Symptom Checklist**

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/feet

Tightness or pressure in head

High blood pressure

Diarrhea

Skin condition

Allergies

Teeth grinding

Digestive upsets (cramping, bloating)

Stomach pain, ulcer

Constipation

Hypoglycemia

Appetite change

Colds

Profuse perspiration

Heart beats rapidly or pounds, even at rest

Use of alcohol, cigarettes, or recreational drugs when nervous

# Psychological Symptoms

Anxiety

Depression

Confusion or spaciness

Irrational fears

Compulsive behaviors

Forgetfulness

Feeling overloaded or overwhelmed

Hyperactivity – feeling like you can’t slow down

Mood swings

Loneliness

Problems with relationships

Dissatisfied/unhappy with work

Difficulty concentrating

Frequent irritability

Restlessness

Frequent boredom

Frequent worrying or obsessing

Frequent guilt

Temper flare-ups

Crying spells

Nightmares

Apathy

Sexual problems

Weight change

Overeating

**Number of Items Checked**

0 - 7

8 - 14

15 - 21

22+

**Stress Level**

Low

Moderate

High

Very High