

Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**PROS-A Scale:  
Anxiety Self-Assessment**

Rate the severity of your symptoms during the past three months on a scale from 0 to 4

*Circle the word or words that best describe your experience*

1. Excessive anxiety and worry interferes with daily functioning  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

2. Worry is difficult to control  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

3. Feeling keyed up, restless, on edge  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

4. Fatigued, tire easily  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

5. Difficulty concentrating  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

6. Irritability  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

7. Muscle tenseness  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

8. Sleeping poorly  
Absent Mild Moderate Severe Extreme  
0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

**PROS-A Scale**  
(Continued)

Please Answer the Following Questions

1. On this Anxiety Scale, have you rated yourself at 2 or greater on items numbered 1 and 2?  
Yes\_\_\_\_\_ No\_\_\_\_\_
2. On this Anxiety Scale, have you rated yourself at 2 or greater on at least 3 other symptoms numbered 3 – 8?  
Yes\_\_\_\_\_ No\_\_\_\_\_
3. Have your symptoms caused significant distress or impairments in your employment or social functioning?  
Yes\_\_\_\_\_ No\_\_\_\_\_
4. Are you free from drug abuse and/or health problems that might be causing your anxiety symptoms?  
Yes\_\_\_\_\_ No\_\_\_\_\_

If you answered **yes** to all of these questions you may be suffering from Generalized Anxiety Disorder. (DSM IV-TR-APA) Your physician or other mental health professional will review your answers, take a medical history and do a mental status examination in order to determine your diagnosis. If you are experiencing a Generalized Anxiety Disorder there are a number of treatments including medications and psychotherapy which can help improve your symptoms.

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