

Measure Your Stress

This index helps you measure your stress level. Some of these common symptoms may be indications of conditions that could benefit from treatment. Please advise your physician if any of these symptoms persist or worsen.

Place an "X" next to the items below that you have experienced in the last two weeks:

Fatigue or tiredness	<input type="checkbox"/>	Feeling helpless or hopeless	<input type="checkbox"/>
Pounding heart	<input type="checkbox"/>	Excessive drinking	<input type="checkbox"/>
Rapid pulse	<input type="checkbox"/>	Excessive smoking	<input type="checkbox"/>
Increased perspiration	<input type="checkbox"/>	Excessive spending	<input type="checkbox"/>
Rapid breathing	<input type="checkbox"/>	Excessive drug or medication use	<input type="checkbox"/>
Aching neck or shoulders	<input type="checkbox"/>	Feeling upset	<input type="checkbox"/>
Low back pain	<input type="checkbox"/>	Feeling nervous or anxious	<input type="checkbox"/>
Gritting teeth or clenching jaw	<input type="checkbox"/>	Increased irritability	<input type="checkbox"/>
Hives or skin rash	<input type="checkbox"/>	Worrisome thoughts	<input type="checkbox"/>
Headache	<input type="checkbox"/>	Impatience	<input type="checkbox"/>
Cold hands or feet	<input type="checkbox"/>	Feelings of depression	<input type="checkbox"/>
Tightness in chest	<input type="checkbox"/>	Loss of sexual interest	<input type="checkbox"/>
Nausea or upset stomach	<input type="checkbox"/>	Feeling angry	<input type="checkbox"/>
Diarrhea or constipation	<input type="checkbox"/>	Sleep difficulties	<input type="checkbox"/>
Nail biting	<input type="checkbox"/>	Forgetfulness	<input type="checkbox"/>
Twitches or tics	<input type="checkbox"/>	Racing or intrusive thoughts	<input type="checkbox"/>
Difficulty swallowing	<input type="checkbox"/>	Feeling restless	<input type="checkbox"/>
Lack of energy	<input type="checkbox"/>	Difficulty concentrating	<input type="checkbox"/>
Over-eating	<input type="checkbox"/>	Periods of crying	<input type="checkbox"/>
Poor appetite	<input type="checkbox"/>	Frequent absences from work/school	<input type="checkbox"/>