

Generalized Anxiety Disorder – 7 (GAD-7)



Client ID Client Name DOB

Date Nurse Home Visitor ID Nurse Home Visitor Name

Check one: Intake Pregnancy 36 Weeks Infancy 1-8 Weeks Infancy 4-6 Months Infancy 12 Months
 Additional (PRN)

Over the last 2 weeks, how often have you been bothered by the following problems?

1. ♦ Feeling nervous, anxious, or on edge
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day
2. ♦ Not being able to stop or control worrying
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day
3. ♦ Worrying too much about different things
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day
4. ♦ Trouble relaxing
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day
5. ♦ Being so restless that it's hard to sit still
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day
6. ♦ Becoming easily annoyed or irritable
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day

7. ♦ Feeling afraid as if something awful might happen
 0 - Not at all
 1 - Several days
 2 - More than half the days
 3 - Nearly every day

Add all individual item scores to determine
 Total Score:

8. If you checked off any problems, how **difficult** have these problems made it for you to do your work, take care of things at home, or get along with other people?
 Not difficult at all
 Somewhat difficult
 Very difficult
 Extremely difficult

Source: Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure for assessing generalized anxiety disorder. *Arch Intern Med.* 2006;166:1092-1097. No permission required to reproduce, translate, display or distribute.

Instructions

The Generalized Anxiety Disorder-7 (GAD-7) “is calculated by assigning scores of 0, 1, 2, and 3 to the response categories of ‘not at all’, ‘several days’, ‘more than half the days’, and ‘nearly every day’ respectively. GAD-7 total score for the 7 items ranges from 0 to 21. Scores of 5, 10, and 15 represent cutpoints for mild, moderate, and severe anxiety, respectively (p. 2).”

Note: With a total score of 5 and above (i.e., mild to severe anxiety): **“Continuous assessment should occur with every contact and formal screening as needed or within 90 days.”**

The last question asks clients “to report ‘how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?’ This single patient-rated difficulty item is not used in calculating any GAD-7 score or diagnosis but rather represents the patient’s global impression of symptom-related impairment. It may be useful in decisions regarding initiation of or adjustments to treatment since it is strongly associated with both psychiatric symptom severity as well as multiple measures of impairment and health-related quality of life (p. 2).”

Instructions for patient health questionnaire (PHQ) and GAD-7 measures. (n.d). Retrieved from <http://www.phqscreeners.com/instructions/instructions.pdf>.