

In the last 2 weeks IF YOU HAVE ANY DEPRESSION SYMPTOMS please check off the ones you have had:

Lack of appetite, depressed feelings, negative or irrational thoughts, shame, decreased interest or enjoyment in activities, agitated, angry, tired, slow or little movement, low energy, insomnia, hypersomnia, poor concentration, indecisive, social isolation, lonely, decrease wish to life, suicide thoughts, suicide plans, suicide means, feeling stuck, hopeless, worthless, excessive guilt, low self-esteem, unresolved grief issues, mood related hallucinations or delusions, history of chronic or recurrent depression, physical symptoms such as pain, hurt or numbness, other.

In the last 2 weeks IF YOU HAVE ANY ANXIETY SYMPTOMS please check off the ones you have had:

Physical symptoms such as muscle tension, headaches, stomach aches, joint pain, bladder/kidney issues, shoulder and neck pain, over arousal/tense. Behavioral symptoms: restless, tired, shaky, dizzy, insomnia (trouble falling asleep and/or trouble staying asleep), difficulty concentrating, feeling constantly on edge, irritable, phobic, nervous, oversensitive, obsessions, compulsions, constant worry, mental fatigue, overwhelmed, perfectionistic, fearful, doubtful, what if thinking, paranoia, distorted thinking, catastrophizing, controlling, reactive, inflexible, on edge, avoidance of crowds or social situations.

In the last 2 weeks IF YOU HAVE ANY POST TRAUMATIC STRESS D/O (PTSD) SYMPTOMS please Check the ones you have had:

Remembering any experience of trauma or witnessing trauma in your past, hypervigilant, night terrors or nightmares, avoiding triggers or reminders of the trauma, trouble sleeping or focusing, intrusive or distressing thoughts, flashbacks, intense reactivity and distress when exposed to traumatic reminders, sense of detachment from others, startle easy and often, alcohol or drug abuse, patterns of interpersonal conflict, verbally or physically violent threats or behavior, inability to maintain employment due to

boss or co-workers conflict or anxiety, __suicidal thoughts, __inability to feel and experience full range of emotions, __sense of shortened life.

In the last 2 weeks IF YOU HAVE ANY ADHD SYMPTOMS please check off the ones you have had:

Disorganized thoughts, disorganized work space, impulsive, flight of ideas, distracted, racing thoughts, tangential thinking, tangential speech where others lose track of what you are talking about, difficulty paying attention, daydreaming, forgetfulness, inability to sit still for long, easily distracted, bored, restless, fidgety, acting first and thinking later, short fuse, chronic low self-esteem, tendency towards addictive or risky behaviors, temper outbursts, overexcitability.

In the last 2 weeks IF YOU HAVE HAD ANY Withdrawal SYMPTOMS please check of the ones you have had:

Tension, Panic attacks, Tremors, Difficulty concentrating, Short-term memory loss, Anxiety, Irritability, Disturbed sleep, Headache, Heart palpitations, Sweating. Nausea. Muscle pain and stiffness, Hypertension, Irregular heart rate Relapse

Please write any other symptoms or factors not listed above that you feel are contributing to the problems in your life, relationships, work, school or other responsibilities.
