

The following questions ask about how you have been feeling during the **past 30 days**.

For each question, please tick the answer that best describes how often you have had this feeling.

| | None of the time | A little of the time | Some of the time | Most of the time | All of the time |
|--|------------------|----------------------|------------------|------------------|-----------------|
| In the past four weeks, how often did you feel worn out for no real reason? | | | | | |
| In the past 4 weeks, how often did you feel nervous? | | | | | |
| In the past 4 weeks, how often did you feel so nervous that nothing could calm you down? | | | | | |
| In the past 4 weeks, how often did you feel hopeless? | | | | | |
| In the past 4 weeks, how often did you feel restless or fidgety? | | | | | |
| In the past 4 weeks, how often did you feel so restless you could not sit still? | | | | | |
| In the past 4 weeks, how often did you feel depressed? | | | | | |
| In the past 4 weeks, how often did you feel that everything was an effort? | | | | | |
| In the past 4 weeks, how often did you feel so sad that nothing could cheer you up? | | | | | |
| In the past 4 weeks, how often did you feel worthless? | | | | | |