

K10

For all questions, please fill in the appropriate response circle. Fill in the circles like this: ●
Please do not tick or cross the circles.

In the past 4 weeks:	None of the time	A little of the time	Some of the time	Most of the time	All of the time
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1. About how often did you feel tired out for no good reason? — — — —
2. About how often did you feel nervous? — — — —
3. About how often did you feel so nervous that nothing could calm you down? — — — —
4. About how often did you feel hopeless? — — — —
5. About how often did you feel restless or fidgety? — — — —
6. About how often did you feel so restless you could not sit still? — — — —
7. About how often did you feel depressed? — — — —
8. About how often did you feel that everything is an effort? — — — —
9. About how often did you feel so sad that nothing could cheer you up? — — — —
10. About how often did you feel worthless? — — — —

Today's date / /
Day Month Year