

# Stress Symptom Checklist\*

Hyland Behavioral Health

Instructions: Check each item that describes a symptom you have experienced to any significant degree during the last month; then total the number of items checked.

## Physical Symptoms

- Headaches (migraine or tension)
- Backaches
- Tight Muscles
- Neck and shoulder pain
- Jaw tension
- Muscle cramp, spasms
- Nervous stomach
- Other pain
- Nausea
- Insomnia (sleeping poorly)
- Fatigue, lack of energy
- Cold hands and/or feet
- Tightness or pressure in the head
- High blood pressure
- Diarrhea
- Skin condition e.g., rash
- Allergies
- Teeth grinding
- Digestive upsets (cramps, bloating)
- Heart beats rapidly or pounds, even at rest
- Stomach pain or ulcer
- Constipation
- Hypoglycemia
- Appetite change
- Colds
- Profuse perspiration
- Overeating
- Weight change
- When nervous, use of alcohol, cigarettes or recreational drug

## Psychological Symptoms

- Anxiety
- Depression
- Confusion or "spaciness"
- Irrational fears
- Compulsive behavior
- Forgetfulness
- Feeling "overload" or overwhelmed"
- Hyperactivity-feeling you can't slow down
- Mood swings
- Loneliness
- Problems with relationships
- Dissatisfied/unhappy with work
- Difficulty concentrating
- Frequent irritability
- Restlessness
- Frequent boredom
- Frequent worrying or obsessing
- Frequent guilt
- Temper flare-up
- Crying spells
- Nightmares
- Apathy
- Sexual problems

If your score is a concern for you, please call Hyland Behavioral Health to schedule an assessment.

Hyland offers a variety of outpatient programs that can assist you with managing your stress.

**Assessment services:**  
314.525.4400  
Please call 24 hours a day.

**Counseling Clinic:**  
314.525.1400

**Outpatient Programs:**  
314.525.7296

### Evaluate your stress level as follows:

Number of Items Checked	Stress Level
0 - 7	Low
8 - 14	Moderate
15 - 21	High
22+	Very High

\*Source: The Anxiety and Phobia Workbook, Edmund J. Bourne, PhD, New Harginger Publishers, Inc.

