

Name: Date:

A **panic attack** means a **sudden** increase in anxiety during which **four or more** of the following sensations are experienced:

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|--|--|
| 1. Feeling short of breath | 2. Palpitations or heart racing |
| 3. Choking | 4. Chest feeling uncomfortable or painful |
| 5. Sweating | 6. Dizziness, unsteady feelings or faintness |
| 7. Feeling unreal or detached from yourself | 8. Nausea or discomfort in the stomach |
| 9. Hot or cold flushes | 10. Trembling or shaking |
| 11. Numbness or tingling feelings (pins and needles) | 12. Fear of dying |
| 13. Fear of doing something uncontrolled or going crazy during an attack | |

Please circle a number on each of the scales below to indicate your answer:

1. What was the **frequency of your panic attacks** during the last two weeks?

0	1	2	3	4
No panic attacks	One panic attack per fortnight	One or two panic attacks per week	At least three panic attacks per week but averaging less than one per day	One or more panic attacks per day

2. How **severe a problem** are **panic attacks** for you at present?

0	1	2	3	4	5	6	7	8
Not at all disturbing and/or disabling		Slightly disturbing and/or disabling		Definitely disturbing and/or disabling		Markedly disturbing and/or disabling		Very disturbing and/or disabling

3. In the past two weeks, how much have you **avoided situations** (or needed someone to accompany you) due to fear that you may panic/ have symptoms? Examples are: being outside home alone, travelling, being in a crowd, supermarket or department store?

0	1	2	3	4	5	6	7	8
Never avoid		Occasionally avoid		Moderate avoidance		Severe avoidance		Always Avoid