

## Panic Disorder Self-Test

Is it possible that I have symptoms of Panic Disorder?

Are you troubled by the following?

<u>Question</u>	<u>Yes</u>	<u>No</u>
Repeated or unexpected "attacks" during which you suddenly are overcome by fear or discomfort for no apparent reason.	_____	_____
If yes, during an "attack" did you experience any of these symptoms		
1. Pounding Heart	_____	_____
2. Sweating	_____	_____
3. Trembling or Shaking	_____	_____
4. Shortness of Breath	_____	_____
5. Choking	_____	_____
6. Chest Pain	_____	_____
7. Nausea or Abdominal Discomfort	_____	_____
8. "Jelly" Legs	_____	_____
9. Dizziness	_____	_____
10. Fear of Losing Control or "Going Crazy"	_____	_____
11. Fear of Dying	_____	_____
12. Numbness or Tingling Sensations	_____	_____
13. Chills or Hot Flashes	_____	_____

As a result of these attacks, have you:

- |   |       |       |
|---|-------|-------|
| 1. Experienced a fear of places or situations where getting help or escape might be difficult, such as in a crowd or on a bridge? | _____ | _____ |
| 2. Felt unable to travel without a companion?   | _____ | _____ |

For at least one month following an attack have you:

- |  |       |       |
|--|-------|-------|
| 1. Felt persistent concern about having another one?     | _____ | _____ |
| 2. Worried about having a heart attack or "Going Crazy"? | _____ | _____ |
| 3. Changed your behavior to accommodate the attack?      | _____ | _____ |

Having more than one illness at the same time can make it difficult to diagnose and treat the different conditions. Depression and substance abuse are among the conditions that occasionally complicate panic disorder.

1. Have you experienced changes in sleeping or eating habits? \_\_\_\_\_

More days than not, do you feel:

1. Sad or depressed? \_\_\_\_\_
2. Disinterested in life? \_\_\_\_\_
3. Worthless or guilty? \_\_\_\_\_

During the last year, has the use of alcohol or drugs:

1. Resulted in your failure to fulfill responsibilities with work, school or family? \_\_\_\_\_
2. Placed you in a dangerous situation, such as driving a car under the influence? \_\_\_\_\_
3. Gotten you arrested? \_\_\_\_\_
4. Continued despite causing problems for you or your loved ones? \_\_\_\_\_