

## EMDR SYMPTOM CHECKLIST

<u>Symptom Name</u>	<u>Not at all</u>	<u>A little</u>	<u>Some</u>	<u>A lot</u>
Fatigue	0	1	2	3
Difficulty sleeping	0	1	2	3
Nightmares/flashbacks	0	1	2	3
Headaches	0	1	2	3
Nausea	0	1	2	3
Over-reaction to sudden noise/mvmnt	0	1	2	3
Hyperactivity	0	1	2	3
Digestive problems	0	1	2	3
Heightened anxiety	0	1	2	3
Anger	0	1	2	3
Panic	0	1	2	3
Uncertainty	0	1	2	3
Feeling overwhelmed	0	1	2	3
Emotional numbness	0	1	2	3
Fear	0	1	2	3
Irritability	0	1	2	3
Poor attention span	0	1	2	3
Fear of going crazy	0	1	2	3
Memory loss	0	1	2	3
Preoccupation with -----	0	1	2	3
Difficulty concentrating	0	1	2	3
Eating disorders	0	1	2	3
Hyper vigilance	0	1	2	3
Emotional outbursts/crying spells	0	1	2	3
Drug or alcohol overuse	0	1	2	3
Social withdrawal	0	1	2	3
Suspiciousness	0	1	2	3
Problems at work	0	1	2	3
Family problems	0	1	2	3
Obsessive compulsive behaviors	0	1	2	3
Confusion	0	1	2	3
Hypersensitivity	0	1	2	3
Frustration	0	1	2	3
Poor problem solving	0	1	2	3
Time distortion	0	1	2	3
Chest pain	0	1	2	3
Faintness, dizziness	0	1	2	3
Self-destructive behavior	0	1	2	3
Procrastination	0	1	2	3
Depression	0	1	2	3

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Medications: \_\_\_\_\_  
\_\_\_\_\_

Hospitalizations: \_\_\_\_\_

Previous mental health Tx: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Are you in ongoing Tx? Yes [ ] No [ ]

Disorder before: \_\_\_\_\_

Depression before: Yes [ ] No [ ]

Medications: \_\_\_\_\_

Incest/molestation: Yes [ ] No [ ]

Do you ever feel as if there is some other part of yourself that comes out and does or says things that you would not do or say? Yes [ ] No [ ]

Do you ever feel as if you are not alone – as if there is someone else or some other part watching you? Yes [ ] No [ ]

Can this other part come out and talk with me? Yes [ ] No [ ]

Are there frequent job changes? Yes [ ] No [ ]

Possess skills you didn't know you had or lost skills you previously possessed?

Yes [ ] No [ ]

Have you experienced any of the following:

Time loss Yes [ ] No [ ]

Anxiety, phobia Yes [ ] No [ ]

Substance abuse Yes [ ] No [ ]

Voices that discuss it Yes [ ] No [ ]

3<sup>rd</sup> person commenting on your thoughts or actions, or argue among selves

Yes [ ] No [ ]

Hear crying, screaming, laughter, or have loud thoughts in your head?

Yes [ ] No [ ]

Headaches Yes [ ] No [ ]

Numbness or tingling Yes [ ] No [ ]

Gastrointestinal symptoms Yes [ ] No [ ]

Bowel disorders Yes [ ] No [ ]

Nausea Yes [ ] No [ ]

Abdominal pains Yes [ ] No [ ]

Reproductive pains Yes [ ] No [ ]

Comments: