

Adult Symptom Checklist

Client: _____

D.O.B. _____

		Never	Sometimes	Often
1	Complains of aches and pains			
2	Spends more time alone			
3	Tires easily, has little energy			
4	Fidgety, unable to sit still			
5	Distracted easily			
6	Is afraid of new situations			
7	Feels sad, unhappy			
8	Is irritable, angry			
9	Feels hopeless			
10	Has trouble concentrating			
11	Less interested in socializing			
12	Perfectionism			
13	Being destructive			
14	Headaches			
15	Stomach aches			
16	Changes in diet			
17	Worries a lot			
18	Takes unnecessary risks			
19	Gets hurt frequently, cries easily			
20	Seems to be having less fun			

21	Does not show feelings			
22	Does not understand other's feelings			
23	Blames other for his/her troubles			
24	Alcohol/drug use			
25	Fantasizing often			
26	Lies			
27	Suicidal threats or thoughts			
28	Suicidal attempts			
29	Feelings of guilt			
30	Quick temper			
31	Startles easily			
32	Excessive sleeping			
33	Insomnia			
34	Panic symptoms			