

Stress Symptom Checklist

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

- Headaches (migraine or tension)
- Backaches
- Tight muscles
- Neck and shoulder pain
- Jaw tension
- Muscle cramps, spasms
- Acne
- Cold hands/feet
- Appetite change
- Fatigue

Emotional

- Frequent irritability
- Mood swings
- Loneliness
- Frequent worrying or obsessing
- Crying spells
- Apathy
- Nightmares
- Feeling overloaded/overwhelmed
- Frequent guilt
- Temper flare-ups

Psychological

- Anxiety
- Depression
- Difficulty concentrating
- Restlessness
- Frequent boredom
- Temper flare-ups
- Racing thoughts
- Compulsive behaviors
- Dissatisfied/unhappy with work
- Problems with memory or concentration

Physiological

- Confusion or spaciness
- Irrational fears
- Forgetfulness
- Hyperactivity
- Problems with relationships
- Sexual problems
- Weight change
- Lethargy
- Profuse perspiration
- Heart beats rapidly or pounds

Total:

Number of Items Checked	Stress Level
0-10.....	Low
11-20.....	Moderate
21-30.....	High
31+.....	Very High



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