

STRESS SIGNAL CHECKLIST

Name: _____

Date: _____

INSTRUCTIONS

Listed below are symptoms or signals of experiencing stress. While it is not likely one experience all the signals, it is not uncommon for one to find several or even many signals. Take a moment and think about how you respond when in tense, anxious or stressful situations. You may respond differently in different situations, such as work vs. emotional circumstances. Please indicate the extent to which you presently experience each of the signals. Rate each symptom according to the following scale:

1. do not notice it 2. weak, but aware of it 3. mild 4. intense 5. very intense

Circle the appropriate number following each stress signal.

| | | | | | |
|--|---|---|---|---|---|
| 1. nausea | 1 | 2 | 3 | 4 | 5 |
| 2. headache (migraine) | 1 | 2 | 3 | 4 | 5 |
| 3. headache (tension) | 1 | 2 | 3 | 4 | 5 |
| 4. constipation | 1 | 2 | 3 | 4 | 5 |
| 5. temper outburst | 1 | 2 | 3 | 4 | 5 |
| 6. chills | 1 | 2 | 3 | 4 | 5 |
| 7. aches/pains | 1 | 2 | 3 | 4 | 5 |
| 8. restlessness | 1 | 2 | 3 | 4 | 5 |
| 9. frequent urination | 1 | 2 | 3 | 4 | 5 |
| 10. irregular eating habits | 1 | 2 | 3 | 4 | 5 |
| 11. acid stomach | 1 | 2 | 3 | 4 | 5 |
| 12. difficulty in sleeping | 1 | 2 | 3 | 4 | 5 |
| 13. jaw clenching | 1 | 2 | 3 | 4 | 5 |
| 14. rapid heartbeat | 1 | 2 | 3 | 4 | 5 |
| 15. grinding teeth | 1 | 2 | 3 | 4 | 5 |
| 16. feeling apprehensive/fearful | 1 | 2 | 3 | 4 | 5 |
| 17. dizziness or faintness | 1 | 2 | 3 | 4 | 5 |
| 18. muscle tension | 1 | 2 | 3 | 4 | 5 |
| 19. bloating | 1 | 2 | 3 | 4 | 5 |
| 20. clammy hands | 1 | 2 | 3 | 4 | 5 |
| 21. hot flashes | 1 | 2 | 3 | 4 | 5 |
| 22. shakiness | 1 | 2 | 3 | 4 | 5 |
| 23. listlessness | 1 | 2 | 3 | 4 | 5 |
| 24. crying easily | 1 | 2 | 3 | 4 | 5 |
| 25. difficulty in concentration | 1 | 2 | 3 | 4 | 5 |
| 26. confusion | 1 | 2 | 3 | 4 | 5 |
| 27. dryness of mouth | 1 | 2 | 3 | 4 | 5 |
| 28. spasms, twitches, tics | 1 | 2 | 3 | 4 | 5 |
| 29. cold hands or feet | 1 | 2 | 3 | 4 | 5 |
| 30. stomach cramps | 1 | 2 | 3 | 4 | 5 |
| 31. trembling | 1 | 2 | 3 | 4 | 5 |
| 32. forgetfulness | 1 | 2 | 3 | 4 | 5 |
| 33. diarrhea | 1 | 2 | 3 | 4 | 5 |
| 34. neck pain | 1 | 2 | 3 | 4 | 5 |
| 35. itching | 1 | 2 | 3 | 4 | 5 |
| 36. irritability | 1 | 2 | 3 | 4 | 5 |
| 37. weakness in legs | 1 | 2 | 3 | 4 | 5 |
| 38. skin problems | 1 | 2 | 3 | 4 | 5 |
| 39. perspiration | 1 | 2 | 3 | 4 | 5 |
| 40. flushing | 1 | 2 | 3 | 4 | 5 |
| 41. chest pain | 1 | 2 | 3 | 4 | 5 |
| 42. difficulty in swallowing / choking | 1 | 2 | 3 | 4 | 5 |
| 43. ragged breathing | 1 | 2 | 3 | 4 | 5 |
| 44. tingling or numb feeling | 1 | 2 | 3 | 4 | 5 |
| 45. stammering / speech difficulty | 1 | 2 | 3 | 4 | 5 |
| 46. feeling hurried | 1 | 2 | 3 | 4 | 5 |
| 47. swelling | 1 | 2 | 3 | 4 | 5 |
| 48. tires easily | 1 | 2 | 3 | 4 | 5 |
| 49. smothering sensation | 1 | 2 | 3 | 4 | 5 |
| 50. other _____ | 1 | 2 | 3 | 4 | 5 |