# Fear (Ages 18+) – Item Bank

For use in Computerized Adaptive Tests and custom Fixed-length Forms

**Please respond to each question or statement by marking one box per row.**

**In the past 7 days…**

| | | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
| Anxiety36 | I felt fearful..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety37 | I felt frightened..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety38 | It scared me when I felt nervous ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety39 | I felt anxious..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety40 | I felt like I needed help for my anxiety ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety41 | I was concerned about my mental health .. | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety42 | I felt upset..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety43 | I had a racing or pounding heart..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety44 | I was anxious if my normal routine was disturbed..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety45 | I had sudden feelings of panic..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |


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**In the past 7 days…**

| | | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
| Anxiety46 | I was easily startled ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety47 | I had trouble paying attention..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety48 | I avoided public places or activities ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety49 | I felt fidgety ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety50 | I felt something awful would happen ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety51 | I felt worried ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety52 | I felt terrified ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety53 | I worried about other people's reactions to me ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety54 | I found it hard to focus on anything other than my anxiety ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety55 | My worries overwhelmed me..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety56 | I had twitching or trembling muscles ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |


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**In the past 7 days…**

| | | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
| Anxiety57 | I felt nervous..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety58 | I felt indecisive ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety59 | Many situations made me worry ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety60 | I had difficulty sleeping..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety61 | I had trouble relaxing ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety62 | I felt uneasy ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety63 | I felt tense ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |
| Anxiety64 | I had difficulty calming down ..... | ☐ 1 | ☐ 2 | ☐ 3 | ☐ 4 | ☐ 5 |


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