

LISA K. SCHKLOVEN, LCSW-C, LLC

3635 OLD COURT ROAD STE 305 PIKESVILLE, MD 21208

PHONE: 443-898-8357 FAX: 443-327-4753

Are you currently experiencing any of the following signs and/or symptoms? Please rate your answers along the following scale:

0 = None 1 = Mild 2 = Moderate 3 = Severe

Depressed Mood	0	1	2	3	General Anxiety	0	1	2	3
Appetite Disturbance	0	1	2	3	Panic Attacks	0	1	2	3
Sleep Disturbance	0	1	2	3	Fears/Phobias	0	1	2	3
Elimination Disturbance	0	1	2	3	Obsessions: Inability to get your mind off of certain topics/issues	0	1	2	3
Low Energy	0	1	2	3	Compulsions: Irrational force that makes you do something, even if you don't want to do it	0	1	2	3
Psychomotor Retardation: Slowed ability to think and move about	0	1	2	3	Anorexia	0	1	2	3
Agitation/Nervousness/Distress	0	1	2	3	Paranoia : Unreasonable suspicion of other people and the reasons behind their behavior	0	1	2	3
Lability/Abrupt Changes in Mood	0	1	2	3	Circumstantial/Tangential: Going off on other tangents when speaking to others about a certain topic	0	1	2	3
Irritability	0	1	2	3					

Person completing this form (Please Print): _____

Signature: _____

Date: _____