Subject ID Session Study Date/ _/	Subject ID	Session	Study	Date/
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## **MASQ-SHORT**

Below is a list of feelings, sensations, problems, and experiences that people sometimes have. Read each item and then mark the appropriate choice in the space next to that item. Use the choice that best describes <u>how much</u> you have felt or experienced things this way <u>during the past week, including today</u>. Use this scale when answering:

1 very slightly or not at all	2 a little	3 moderately	4 quite a bit	5 extremely	
 1. Felt sad			32. Was unable to	relax	
2. Startled easily			33. Felt really slo	wed down	
 3. Felt cheerful			34. Was disappoi	nted in myself	
 4. Felt afraid			35. Felt nauseous		
 5. Felt discouraged			36. Felt hopeless		
 6. Hands were shak	ку		37. Felt dizzy or l	ightheaded	
 7. Felt optimistic			38. Felt sluggish	or tired	
 8. Had diarrhea			39. Felt really "up	o" or lively	
 9. Felt worthless			40. Had a pain in	my chest	
 10. Felt really happy	y		41. Felt really bo	red	
 11. Felt nervous			42. Felt like I was	choking	
 12. Felt depressed			43. Looked forwa	rd to things with enjoyment	
 13. Was short of bro	eath		44. Muscles twite	hed or trembled	
 14. Felt uneasy			45. Felt pessimist	ic about the future	
 15. Was proud of m	yself		46. Had a very dr	y mouth	
 16. Had a lump in n	ny throat		47. Felt like I had	a lot of interesting things to do	
 17. Felt faint			48. Was afraid I v	vas going to die	
 18. Felt unattractive	2		49. Felt like had a	accomplished a lot	
 19. Had hot or cold	spells		50. Felt like it too	k an extra effort to get started	
 20. Had an upset sto	omach		51. Felt like nothi	ng was very enjoyable	
 21. Felt like a failur	re		52. Heart was rac	ing or pounding	
 22. Felt like I was h	aving a lot of fu	ın	53. Felt like I had	a lot to look forward to	
 23. Blamed myself	for a lot of thing	gs	54. Felt numbnes	s or tingling in my body	
 24. Hands were cold	d or sweaty		55. Felt tense or "	high-strung"	
 25. Felt withdrawn	from other peop		56. Felt hopeful a	bout the future	
 26. Felt keyed up, "	on edge"		57. Felt like there	wasn't anything interesting or fun to	o do
 27. Felt like I had a	lot of energy		58. Seemed to mo	ve quickly and easily	
 28. Was trembling of	or shaking		59. Muscles were	tense or sore	
 29. Felt inferior to o	others		60. Felt really goo	od about myself	
 30. Had trouble swa	allowing		61. Thought abou	t death or suicide	
31. Felt like crying			62. Had to urinate	efrequently	