



Help Yourself, Help Others (hyho)

Optional text to include in your printout (this information will not be saved, limited to 255 characters).

Wide Range

Thank you for taking the screening. We are glad you took this step in managing your emotional and mental well-being. Please read below for specific results for your responses and recommendations for next steps.

Please remember that these results are NOT diagnoses, but we do suggest follow-up with a professional as a best next step. Many people experience mental health problems during their lifetime. Please see below for resources that can help.

	Your Results	Recommended Next Steps
Anxiety and Depression	Your results indicate that you are experiencing some symptoms related to anxiety/depression.	We recommend you complete a more in-depth screening for Anxiety and Depression: Anxiety Screening Tool Depression Screening Tool
Suicide	Your results indicate that you are not experiencing symptoms related to suicidal ideation.	Keep in mind, if you're thinking about suicide or are worried about a friend or loved one, help is available: <ul style="list-style-type: none">• call the National Suicide Prevention Lifeline 1-800-273-TALK (8255)• dial 911 and go/take them immediately to the nearest hospital emergency room for an evaluation

	Your Results	Recommended Next Steps
Bipolar	Your results indicate that you are experiencing symptoms related to Bipolar Disorder	We recommend that you take a more in-depth screening for Bipolar: Bipolar Screening Tool
PTSD	Your results indicate that you are not experiencing symptoms related to PTSD	
Substance Use	Your results indicate that you are not experiencing symptoms related to Substance Use Disorder	Note, however, that due to language barriers, individual interpretation of the questions, or other confounding factors, those answering "no" to all questions may still be at risk due to elevated drinking or drug use levels. If interested, you can take a more in-depth screening for Substance Use: Substance Use Screening Tool
Eating Disorder	Your results indicate that you are experiencing symptoms related to Eating Disorders	We recommend you take a full Eating Disorder assessment: Eating Disorder Screening Tool

Note: Please print or email your results, because once you click away from the page you cannot go back to get your results. If you have printed or emailed your results, the referral information will be listed below. Please know that you are not alone. Reaching out for help is a big step and we encourage you to seek support as soon as possible.

Resources

For additional information on mental health services in your area, please refer to SAMHSA's Mental Health Service Locator: <https://www.findtreatment.samhsa.gov/>.

If you're thinking about suicide or are worried about someone else, call the [National Suicide Prevention Lifeline](#) 1-800-273-TALK (8255), dial 911 or go/take them immediately to the nearest hospital emergency room for an evaluation.

Screening Questions

- 1. Over the last 2 weeks, how often have you been bothered by the following problems?

Feeling nervous, anxious, or on edge.

Several days

- 2. Over the last 2 weeks, how often have you been bothered by the following problems? Not being able to stop or control worrying.

Several days

- 3. Over the last 2 weeks, how often have you been bothered by the following problems? Little interest or pleasure in doing things.

More than half the days

- 4. Over the last 2 weeks, how often have you been bothered by the following problems? Feeling down, depressed, or hopeless.

Several days

- 5. In the past 2 weeks have you thought about or tried to end your life?

None or little of the time

- 6. Have you been experiencing severe mood swings, more energy than usual, or less need to sleep?

Yes

- 7. Sometimes things happen to people that are unusually or especially frightening, horrible, or traumatic. For example: %0D%0A%0D%0A * a serious accident or fire%0D%0A * a physical or sexual assault or abuse%0D%0A * an earthquake or flood%0D%0A * a war%0D%0A * seeing someone be killed or seriously injured%0D%0A * having a loved one die through homicide or suicide%0D%0A Have you ever experienced this kind of event?

No

- 8. In the past month, have you: Had nightmares about the event(s) or thought about the event(s) when you did not want to?

- 9. In the past month, have you: Tried hard not to think about the event(s) or went out of your way to avoid situations that reminded you of the event(s)?

- 10. In the past month, have you: Been constantly on guard, watchful, or easily startled?

- 11. In the past month, have you: Felt numb or detached from people, activities, or your surroundings?

- 12. In the past month, have you: Felt guilty or unable to stop blaming yourself or others for the event(s) or any problems the event(s) may have caused?
- 13. Have you ever felt that you ought to cut down on your drinking or drug use?
No
- 14. Have people annoyed you by criticizing your drinking or drug use?
No
- 15. Have you ever felt bad or guilty about your drinking or drug use?
No
- 16. Have you ever had a drink or used drugs first thing in the morning ("eye-opener") to steady your nerves, e.g. get rid of a hangover, or get the day started?
No
- 17. Are you terrified of gaining weight or constantly preoccupied by your eating habits?
Yes
- 18. In the past 3 months, have you had a sense of loss of control AND you also ate what most people would regard as an unusually large amount of food at one time?
Yes
- 19. In the past 3 months have you made yourself throw up, or used diet pills, or diuretics, or laxatives, or exercised excessively, or fasted as a means to control your weight and shape?
No
- 20. Anxiety
- 21. Depression
- 22. Bipolar
- 23. Psychosis
- 24. PTSD
- 25. Substance Abuse
- 26. Eating Disorder
- 27. Other

MindWise Innovations is a non-profit organization that provides educational screening programs for certain mental health conditions. MindWise Innovations does not provide medical advice and is not intended to be a substitute for professional advice, diagnosis, or treatment. For an accurate diagnosis of a mental health disorder, you should seek an evaluation from a qualified mental health professional. This email contains private, confidential health information related to the sender. MindWise Innovations accepts no liability for the content of this printout, or for the consequences of any actions taken on the basis of the information provided. Distributing this printout does not confirm that actions will be taken by the receiving party. If you are not the intended recipient you are notified that disclosing, copying, distributing or taking any action in reliance on the contents of this information is strictly prohibited. FOR A POTENTIALLY LIFE-THREATENING PROBLEM, PLEASE CALL 911 OR THE SUICIDE PREVENTION LIFELINE AT 1-800-273-TALK(8255).