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THE BURNS ANXIETY INVENTORY

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The thirty-three items on the BAI evaluate the symptoms of anxiety, such as worry, nervousness or feelings of panic, fears of dying, or a racing heart. For each symptom, ask yourself how strongly you have been feeling this way in the past few days on a scale from "not at all" (scored 0) to "a lot" (scored 3). Please put a X in the space to the right of each item that best indicates how you have been feeling, as in this example:

| | Not At All = 0 | Somewhat = 1 | Moderately = 2 | A Lot = 3 |
|--------------------------------------|----------------|--------------|----------------|-----------|
| 1. Anxiety, nervousness, worry, fear | | | | |

You can see that the man who completed item 1 indicated he had been feeling moderately worried. Once you complete all thirty-three questions, add up your total score add put the total at the bottom, along with today's date.

Your total score on the BAI can range between 0 (indicating no anxiety) and 99 intense anxiety). As with the BDC, low scores are the best. Higher scores Indicate severe levels of anxiety. The scoring key on page 25 will help you interpret scores on this test.

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Place a check (X) in the box to the right of each category to indicate how much this type of feeling has bothered you in the past several days.

| Category 1: Anxious Feelings | Not at All = 0 | Somewhat = 1 | Moderately = 2 | A Lot = 3 |
|---|-----------------------|---------------------|-----------------------|------------------|
| 1. Anxiety, nervousness, worry, or fear | | | | |
| 2. Feeling that things around you are strange or unreal | | | | |
| 3. Feeling detached from all or part of your body | | | | |
| 4. Sudden unexpected panic spells | | | | |
| 5. Apprehension or a sense of impending doom | | | | |
| 6. Feeling tense, stressed, "uptight," or on edge | | | | |
| Category 11: Anxious Thoughts | Not at All = 0 | Somewhat = 1 | Moderately =2 | A Lot = 3 |
| 7. Difficulty concentrating | | | | |
| 8. Racing thoughts | | | | |
| 9. Frightening fantasies or daydreams | | | | |
| 10. Feeling that you're on the verge of losing control | | | | |
| 11. Fears of cracking up or going crazy | | | | |
| 12. Fears of fainting or passing out | | | | |
| 13. Fears of physical illnesses or heart attacks or dying | | | | |
| 14. Concerns about looking foolish or inadequate | | | | |
| 15. Fears of being alone, isolated, or abandoned | | | | |
| 16. Fears of criticism or disapproval | | | | |
| 17. Fears that something terrible is about to Happen | | | | |

THE BURNS ANXIETY INVENTORY (Continued)

| Category III: Physical Symptoms | Not at All = 0 | Somewhat = 1 | Moderately = 2 | A Lot = 3 |
|---|-----------------------|---------------------|-----------------------|------------------|
| 18. Skipping, racing, or pounding of the heart (palpitations) | | | | |
| 19. Pain, pressure, or tightness in the chest | | | | |
| 20. Tingling or numbness in the toes or fingers | | | | |
| 21. Butterflies or discomfort in the stomach | | | | |
| 22. Constipation or diarrhea | | | | |
| 23. Restlessness or jumpiness | | | | |
| 24. Tight, tense muscles | | | | |
| 25. Sweating not brought on by heat | | | | |
| 26. A lump in the throat | | | | |
| 27. Trembling or shaking | | | | |
| 28. Rubbery or "jelly" legs | | | | |
| 29. Feeling dizzy, lightheaded, or off balance | | | | |
| 30. Choking or smothering sensations or difficulty breathing | | | | |
| 31. Headaches or pains in the neck or back | | | | |
| 32. Hot flashes or cold chills | | | | |
| 33. Feeling tired, weak, or easily exhausted | | | | |
| Total score on items 1-33 = | | | | |

SCORING KEY FOR THE BURNS ANXIETY INVENTORY

| TOTAL SCORE | DEGREE OF ANXIETY |
|--------------------|---------------------------------|
| 0-----4 | MINIMAL OR NO ANXIETY |
| 5-----10 | BORDERLINE ANXIETY |
| 11----20 | MILD ANXIETY |
| 21----30 | MODERATE ANXIETY |
| 31----50 | SEVERE ANXIETY |
| 51----99 | EXTREME ANXIETY OR PANIC |