MIRACLE Counseling

LEVEL 2—Anxiety—Child Age 11–17*

* PROMIS Emotional Distress—Anxiety—Pediatric Item Bank

Patient Name _____ DOB _____ Female ☐ Other ☐

Provider Name _____ Date _____ Male ☐

Instructions to the child: On the DSM-5 Level 1 cross-cutting questionnaire that you just completed, you indicated that *during the past 2 weeks* you have been bothered by "feeling nervous, anxious, or scared", "not being able to stop worrying" and/or "not being able to do things you wanted to or should have done because they made you feel nervous" at a mild or greater level of severity. The questions below ask about these feelings in more detail and especially how often you have been bothered by a list of symptoms **during the past 7 days. Please respond to each item by marking (✓ or x) one box per row.**

							Clinician Use
In the past SEVEN (7) DAYS....							**Item Score**
		Never	**Almost Never**	**Sometimes**	**Often**	**Almost Always**	
1.	I felt like something awful might happen.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
2.	I felt nervous.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
3.	I felt scared.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
4.	I felt worried.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
5.	I worried about what could happen to me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
6.	I worried when I went to bed at night.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
7.	I got scared really easy.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
8.	I was afraid of going to school.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
9.	I was worried I might die.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
10.	I woke up at night scared.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
11.	I worried when I was at home.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
12.	I worried when I was away from home.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
13.	It was hard for me to relax.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	
						Total/Partial Raw Score:	0
						Prorated Total Raw Score:	
						T-Score:	0

*

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Instructions to Clinicians

The DSM-5 Level 2—Anxiety—Child Age 11–17 measure is the 13-item PROMIS Anxiety Short Form that assesses the pure domain of anxiety in children and adolescents. The PROMIS Anxiety scale was developed for and can be used with children ages 8–17; however, it was tested only in children ages 11–17 in the DSM-5 Field Trials. The measure is completed by the child prior to a visit with the clinician. Each item asks the child receiving care to rate the severity of his or her anxiety **during the past 7 days**.

Scoring and Interpretation

Each item on the measure is rated on a 5-point scale (1=never; 2=almost never; 3=sometimes; 4=often; and 5=almost always) with a range in score from 13 to 65 with higher scores indicating greater severity of anxiety. The clinician is asked to review the score on each item on the measure during the clinical interview and indicate the raw score for each item in the section provided for "Clinician Use." The raw scores on the 13 items should be summed to obtain a total raw score. Next, the T-score table should be used to identify the T-score associated with the child's total raw score and the information entered in the T-score row on the measure.

Score	T-Score	SE
13	32.3	5.7
14	36.6	4.8
15	38.9	4.6
16	41.1	4.3
17	42.8	4.1
18	44.3	3.9
19	45.7	3.8
20	47	3.7
21	48.2	3.6
22	49.4	3.5
23	50.4	3.4
24	51.4	3.4
25	52.4	3.3
26	53.3	3.3
27	54.2	3.3
28	55.1	3.3
29	56	3.2
30	56.8	3.2
31	57.6	3.2
32	58.4	3.2
33	59.2	3.2
34	60	3.2
35	60.8	3.2
36	61.6	3.1
37	62.3	3.1
38	63.1	3.1
39	63.8	3.1

Score	T-Score	SE
40	64.5	3.1
41	65.3	3.1
42	66	3.1
43	66.8	3.1
44	67.5	3.1
45	68.2	3.1
46	69	3.1
47	69.7	3.1
48	70.5	3.1
49	71.3	3.1
50	72	3.1
51	72.8	3.2
52	73.6	3.2
53	74.4	3.2
54	75.3	3.2
55	76.1	3.3
56	77	3.3
57	77.9	3.4
58	78.9	3.4
59	79.9	3.5
60	81	3.6
61	82.1	3.7
62	83.3	3.7
63	84.7	3.8
64	86.1	3.8
65	88	3.8

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Note: This look-up table works only if all items on the form are answered. If 75% or more of the questions have been answered, you are asked to prorate the raw score and then look up the conversion to T-Score. The formula to prorate the partial raw score to Total Raw Score is:

$$\frac{\text{(Raw sum x number of items on the short form)}}{\text{Number of items that were actually answered}}$$

If the result is a fraction, round to the nearest whole number. For example, if 12 of 13 items were answered and the sum of those 12 responses was 40, the prorated raw score would be 40 X 13/12 = 43, after rounding. The T-score in this example would be 66.8.

The T-scores are interpreted as follows:

Less than 55	= None to slight
55.0—59.9	= Mild
60.0—69.9	= Moderate
70 and over	= Severe

If more than 25% of the total items (in this case more than 3) are missing a response, the scores should not be used. Therefore, the child receiving care should be encouraged to complete all of the items on the measure.

Frequency of Use

To track change in the severity of the child's anxiety over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the child's symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the child that might warrant further assessment, treatment, and follow-up. Your clinical judgment should guide your decision.

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NOTES:

The APA is offering a number of "emerging measures" for further research and clinical evaluation. These patient assessment measures were developed to be administered at the initial patient interview and to monitor treatment progress. They should be used in research and evaluation as potentially useful tools to enhance clinical decision-making and not as the sole basis for making a clinical diagnosis. Instructions, scoring information, and interpretation guidelines are provided; further background information can be found in DSM-5. The APA requests that clinicians and researchers provide further data on the instruments' usefulness in characterizing patient status and improving patient care at http://www.dsm5.org/Pages/Feedback-Form.aspx.