

TCU HLTHForm – Mental and Physical Health

Item Scoring Guide

Scoring Instructions. Items (with response categories of 1=None of the time to 5=All of the time) represent Kessler's psychological distress scale (K10) and physical health functioning.

1. *Psychological distress* items (Q 12-21) are summed to define a "K10 total score" (10-50);
 - a. scores of 25-29 indicate "high" distress (Andrews & Slade, 2001), and
 - b. scores of 30-50 indicate "very high" psychological distress (Baillie, 2005).
2. *Physical health* items (Q 1-11) capture specific physical health information and although they do not form a single-construct scale these responses can be summed or averaged to reflect a "physical health problems severity index" (see Rowan-Szal et al., 2011).

Psychological Distress (K10) Scale

During the PAST 30 DAYS, how often did you feel –

12. tired out for no good reason?
13. nervous?
14. so nervous that nothing could calm you down?
15. hopeless?
16. restless or fidgety?
17. so restless that you could not sit still?
18. depressed?
19. so depressed that nothing could cheer you up?
20. that everything was an effort?
21. worthless?

K10 scale: Kessler, R. C., Barker, P. R., Colpe, L. J. et al. (2003). Screening for serious mental illness in the general population. *Archives of General Psychiatry*, 60(2), 184-189. [Also see Andrews, G., & Slade, T. (2001). *Australian NZ J Public Health*, 25(6), 494-497; and Baillie, A. (2005). *Social Psychiatry and Psychiatric Epidemiology*, 40, 743-748].

Also see Rowan-Szal, G. A., Joe, G. W., Bartholomew, N. G., Pankow, J., & Simpson, D. D. (2011). Brief Trauma and Mental Health Assessments for female offenders in addiction treatment. *Journal of Offender Rehabilitation*.

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Client ID#								Today's Date						Facility ID#				Zip Code				Administration			

Client ID#								Today's Date								Facility ID#						Zip Code						Administration					

<i>Not at all</i>	<i>A little bit</i>	<i>Moder- ately</i>	<i>Quite a bit</i>	<i>Extre- mely</i>
(1)	(2)	(3)	(4)	(5)

- | | | | | | | |
|-----|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 12. | Feeling as if your future will somehow
be cut short? | ☐ | ☐ | ☐ | ☐ | ☐ |
| 13. | Trouble falling or staying asleep? | ☐ | ☐ | ☐ | ☐ | ☐ |
| 14. | Feeling irritable or having
angry outbursts? | ☐ | ☐ | ☐ | ☐ | ☐ |
| 15. | Having difficulty concentrating? | ☐ | ☐ | ☐ | ☐ | ☐ |
| 16. | Being “super-alert” or watchful
or on guard? | ☐ | ☐ | ☐ | ☐ | ☐ |
| 17. | Feeling jumpy or easily startled? | ☐ | ☐ | ☐ | ☐ | ☐ |

From Weathers, Litz, Huska, Keane (1994). National Center for PTSD: Boston, MA