

STRESS AND SUSCEPTIBILITY TO INFECTIOUS DISEASE STUDY

PATIENT #: _____

DATE: _____

INITIALS: _____

STUDY DAY: _____

A) Symptoms (0 = None, 1 = Mild, 2 = Moderate, 3 = Severe, 4 = Very Severe)

CONGESTION	0	1	2	3	4
RHINORRHEA	0	1	2	3	4
SNEEZING	0	1	2	3	4
COUGH	0	1	2	3	4
SORE THROAT	0	1	2	3	4
MALaise	0	1	2	3	4
HEADACHE	0	1	2	3	4
CHILLS	0	1	2	3	4

OTHER _____

DO YOU HAVE A COLD/FLU YES NO

For each item below, circle the number that indicates how much you have felt that way in the last 24 hours:

B) MOOD SCORE (0 = Not at all, 1 = A little, 2 = Some, 3 = Quite a Bit, 4 = A Lot)

NERVOUS	0	1	2	3	4
HOSTILE	0	1	2	3	4
HAPPY	0	1	2	3	4
DEPRESSED	0	1	2	3	4
ENERGETIC	0	1	2	3	4
TIRED	0	1	2	3	4
SAD	0	1	2	3	4
CHEERFUL	0	1	2	3	4
"ON EDGE"	0	1	2	3	4

PCS1 Daily Symptoms and Affect in Quarantine

SLUGGISH	0	1	2	3	4
CALM	0	1	2	3	4
RELAXED	0	1	2	3	4
WORN OUT	0	1	2	3	4
FATIGUED	0	1	2	3	4
UNHAPPY	0	1	2	3	4
FULL OF PEP	0	1	2	3	4
RESENTFUL	0	1	2	3	4
LIVELY	0	1	2	3	4
ANGRY	0	1	2	3	4
PLEASED	0	1	2	3	4
WORN OUT	0	1	2	3	4
SLEEPY	0	1	2	3	4
AT EASE	0	1	2	3	4
COMFORTABLE	0	1	2	3	4
UNEASY	0	1	2	3	4