

Weiss Symptom Record II (WSR-II)

Instructions:

This is a problem checklist. Not all the items will be appropriate for you. Please indicate the level of difficulty associated with each item.

		None	Mild	Moderate	Severe	NA
1	ATTENTION Attention to details or makes careless mistakes	0	1	2	3	0
2	Holding attention or remaining focused	0	1	2	3	0
3	Listening or mind seems elsewhere	0	1	2	3	0
4	Instructions or finishing work	0	1	2	3	0
5	Organising (e.g., time, messy, deadlines)	0	1	2	3	0
6	Avoids or dislikes activities requiring effort	0	1	2	3	0
7	Loses or misplaces things	0	1	2	3	0
8	Easily distracted	0	1	2	3	0
9	Forgetful (e.g., chores, bills, appointments)	0	1	2	3	0
10	HYPERACTIVITY AND IMPULSIVITY Fidgets or squirms	0	1	2	3	0
11	Trouble staying seated	0	1	2	3	0
12	Runs about or feels restless inside	0	1	2	3	0
13	Loud or difficulty being quiet	0	1	2	3	0
14	Often on the go	0	1	2	3	0
15	Talks too much	0	1	2	3	0
16	Blurts out comments	0	1	2	3	0



		None	Mild	Moderate	Severe	NA
17	Dislikes waiting (e.g., taking turns or in line)	0	1	2	3	0
18	Interrupts or intrudes on others (e.g., butting in)	0	1	2	3	0
19	OPPOSITIONAL Loses temper	0	1	2	3	0
20	Easily annoyed	0	1	2	3	0
21	Angry and resentful	0	1	2	3	0
22	Argues	0	1	2	3	0
23	Defiant	0	1	2	3	0
24	Deliberately annoys other people	0	1	2	3	0
25	Blames other people rather than themselves	0	1	2	3	0
26	Spiteful	0	1	2	3	0
27	DEVELOPMENT AND LEARNING Wetting (after age 5)	0	1	2	3	0
28	Soiling (after age 4)	0	1	2	3	0
29	Reading	0	1	2	3	0
30	Spelling	0	1	2	3	0
31	Math	0	1	2	3	0
32	Writing	0	1	2	3	0
33	AUTISM SPECTRUM Difficulty with talking back and forth	0	1	2	3	0
34	Unusual eye contact or body language	0	1	2	3	0
35	Speech is odd (monotone, unusual words)	0	1	2	3	0
36	Restricted, fixed, intense interests	0	1	2	3	0



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37	Odd, repetitive movements (e.g., flapping)	0	1	2	3	0
38	Does not easily chit chat	0	1	2	3	0
39	MOTOR DISORDERS Repetitive noises (e.g., sniffing, throat clearing)	0	1	2	3	0
40	Repetitive movements (blinking, shrugging)	0	1	2	3	0
41	Clumsy	0	1	2	3	0
42	PSYCHOSIS Hearing voices that are not there	0	1	2	3	0
43	Seeing things that are not there	0	1	2	3	0
44	Scrambled thinking	0	1	2	3	0
45	Paranoia (feeling people are against you)	0	1	2	3	0
46	DEPRESSION Sad or depressed most of the day	0	1	2	3	0
47	Lack of interest or pleasure most of the day	0	1	2	3	0
48	Weight loss, weight gain, or change in appetite	0	1	2	3	0
49	Difficulty sleeping or sleeping too much	0	1	2	3	0
50	Agitated	0	1	2	3	0
51	Slowed down	0	1	2	3	0
52	Feels worthless	0	1	2	3	0
53	Tired, no energy	0	1	2	3	0
54	Hopeless, pessimistic	0	1	2	3	0
55	Withdrawal from usual interests/people	0	1	2	3	0
56	Decrease in concentration	0	1	2	3	0



		None	Mild	Moderate	Severe	NA
57	MOOD REGULATION Distinct period(s) of intense excitement	0	1	2	3	0
58	Distinct period(s) of inflated self-esteem, grandiose	0	1	2	3	0
59	Distinct period(s) of increased energy	0	1	2	3	0
60	Distinct period(s) of decreased need for sleep	0	1	2	3	0
61	Distinct period(s) of racing thoughts or speech	0	1	2	3	0
62	Irritable behaviour that is out of character	0	1	2	3	0
63	Rage attacks, anger outbursts, hostility	0	1	2	3	0
64	SUICIDE Suicidal thoughts	0	1	2	3	0
65	Suicide attempt(s) or a plan	0	1	2	3	0
66	ANXIETY Intense fears (e.g., heights, crowds, spiders)	0	1	2	3	0
67	Fear of social situations or performing	0	1	2	3	0
68	Panic attacks	0	1	2	3	0
69	Fear of leaving e.g., the house, public transportation	0	1	2	3	0
70	Worrying and/or anxious most days	0	1	2	3	0
71	Nervous, can't relax	0	1	2	3	0
72	Obsessive thoughts (e.g., germs, perfectionism)	0	1	2	3	0
73	Compulsive rituals (e.g., checking, hand washing)	0	1	2	3	0
74	Hair pulling, nail biting, or skin picking	0	1	2	3	0
75	Preoccupation with physical complaints	0	1	2	3	0
76	Chronic pain	0	1	2	3	0



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77	STRESS RELATED DISORDERS Physical abuse	0	1	2	3	0
78	Sexual abuse	0	1	2	3	0
79	Neglect	0	1	2	3	0
80	Other severe trauma	0	1	2	3	0
81	PTSD Flashbacks or nightmares	0	1	2	3	0
82	Avoidance	0	1	2	3	0
83	Intrusive thoughts of traumatic events	0	1	2	3	0
84	SLEEP Trouble falling asleep or staying asleep	0	1	2	3	0
85	Excessive daytime sleepiness	0	1	2	3	0
86	Snoring or stops breathing during sleep	0	1	2	3	0
87	EATING Distorted body image	0	1	2	3	0
88	Underweight	0	1	2	3	0
89	Binge eating	0	1	2	3	0
90	Overweight	0	1	2	3	0
91	Eating too little or refusing to eat	0	1	2	3	0
92	CONDUCT Verbal aggression	0	1	2	3	0
93	Physical aggression	0	1	2	3	0
94	Used a weapon against people (stones, sticks, etc.)	0	1	2	3	0
95	Cruel to animals	0	1	2	3	0
96	Physically cruel to people	0	1	2	3	0



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97	Stealing or shoplifting	0	1	2	3	0
98	Deliberately sets fires	0	1	2	3	0
99	Deliberately destroys property	0	1	2	3	0
100	Frequent lying	0	1	2	3	0
101	Lack of remorse or guilt	0	1	2	3	0
102	Lack of empathy or concern for others	0	1	2	3	0
103	SUBSTANCE USE Misuse of prescription drugs	0	1	2	3	0
104	Alcohol > 14 drinks/week or 4 drinks at once	0	1	2	3	0
105	Smoking or tobacco use	0	1	2	3	0
106	Marijuana	0	1	2	3	0
107	Other street drugs	0	1	2	3	0
108	Excessive over the counter medications	0	1	2	3	0
109	Excessive caffeine (colas, coffee, tea, pills)	0	1	2	3	0
110	ADDICTIONS Gambling	0	1	2	3	0
111	Excessive internet, gaming, or screen time	0	1	2	3	0
112	Other addiction	0	1	2	3	0
113	PERSONALITY Self-destructive	0	1	2	3	0
114	Stormy, conflicted relationships	0	1	2	3	0
115	Self-injurious behaviour (e.g., cutting)	0	1	2	3	0
116	Low self-esteem	0	1	2	3	0



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117	Manipulative	0	1	2	3	0
118	Self-centered	0	1	2	3	0
119	Arrogant	0	1	2	3	0
120	Suspicious	0	1	2	3	0
121	Deceitful with no remorse	0	1	2	3	0
122	Breaking the law or antisocial behaviour	0	1	2	3	0
123	Tends to be a loner	0	1	2	3	0

Developer Reference:

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