

Agoraphobic Cognitions Questionnaire

Client ID

Date

Below are some thoughts or ideas that may pass through your mind when you are nervous or frightened. Please indicate how often each thought occurs when you are nervous. rate from 1-5 using the scale below:

- | | | | | |
|-----------------------------------|------------------------------------|---|-------------------------------------|------------------------------------|
| 1 | 2 | 3 | 4 | 5 |
| thought
never
occurs | thought
rarely
occurs | thought occurs
during half of
the times | thought
usually
occurs | thought
always
occurs |

.....when I am nervous

Please rate all items.

1. I am going to throw up	1	2	3	4	5
2. I am going to pass out	1	2	3	4	5
3. I must have a brain tumor	1	2	3	4	5
4. I will have a heart attack	1	2	3	4	5
5. I will choke to death	1	2	3	4	5
6. I am going to act foolish	1	2	3	4	5
7. I am going blind	1	2	3	4	5
8. I will not be able to control myself	1	2	3	4	5
9. I will hurt someone	1	2	3	4	5
10. I am going to have a stroke	1	2	3	4	5
11. I am going crazy	1	2	3	4	5
12. I am going to scream	1	2	3	4	5
13. I am going to babble or talk funny	1	2	3	4	5
14. I am going to be paralyzed by fear	1	2	3	4	5
15. other ideas not listed (please describe and rate them)					
.....	1	2	3	4	5
.....	1	2	3	4	5
.....	1	2	3	4	5