



**SANXDE-1**

**ANXIETY AND DEPRESSION SCREENING**

- Do you feel nervous, or do you worry?
- Do you worry that your cancer will recur?
- Do you have trouble controlling your worry?
- Do you have trouble sleeping? (eg, staying asleep, falling asleep, too much sleep)<sup>b</sup>
- Do you have difficulty concentrating?
- Do you have less interest or enjoyment in activities?
- Do you feel sad or depressed?
- Are you having difficulty performing daily activities because of these (above mentioned) feelings or problems?