

Table 1

FEAR questionnaire (adapted from Krasucki et al³¹)

Main question	Follow-up question	Scoring
In the past month have you felt so fidgety or restless that you couldn't sit still?	IF YES: Do you know what brought it on? Was it worry, fear or something else?	Score 1 if restlessness caused by worry/fear/anxiety
Do you take anything to help you relax?	What about sedative tablets or alcohol?	Score 1 if taking medication or alcohol to relax
How often, if at all, have you worried in the past month?		≤ some days score 0 ≥ most days score 1
Have you felt on edge, strung up or mentally tense in the past month?		≤ some days score 0 ≥ most days score 1

A score of 2 or more predicts a high likelihood of the presence of an anxiety disorder (sensitivity 77% and specificity 83%)