

Initials: _____ DOB: _____ Date: _____ Event*: _____

IMPACT OF EVENT SCALE – REVISED

Instructions: Below is a list of difficulties people sometimes have after stressful life events. Please read each item and then indicate how distressing each difficulty has been for you DURING THE PAST SEVEN (7) DAYS with respect to the * event, how much were you distressed or bothered by these difficulties.

	Not at All	Little bit	Moderately	Quite a bit	Extremely
1. Any reminder brought back feelings about it.	0	1	2	3	4
2. I had trouble staying asleep.	0	1	2	3	4
3. Other things kept making me think about it.	0	1	2	3	4
4. I felt irritable and angry.	0	1	2	3	4
5. I avoided letting myself get upset when I thought about it or was reminded of it.	0	1	2	3	4
6. I thought about it when I didn't mean to.	0	1	2	3	4
7. I felt as if it hadn't happened or wasn't real.	0	1	2	3	4
8. I stayed away from reminders about it.	0	1	2	3	4
9. Pictures about it popped into my mind.	0	1	2	3	4
10. I was jumpy and easily startled.	0	1	2	3	4
11. I tried not to think about it.	0	1	2	3	4
12. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	0	1	2	3	4
13. My feelings about it were kind of numb.	0	1	2	3	4
14. I found myself acting or feeling like I was back at that time.	0	1	2	3	4
15. I had trouble falling asleep.	0	1	2	3	4
16. I had waves of strong feelings about it.	0	1	2	3	4
17. I tried to remove it from my memory.	0	1	2	3	4
18. I had trouble concentrating.	0	1	2	3	4
19. Reminders of it caused me to have physical reactions, such as sweating, trouble breathing.	0	1	2	3	4
20. I had dreams about it.	0	1	2	3	4
21. I felt watchful and on-guard.	0	1	2	3	4
22. I tried not to talk about it.	0	1	2	3	4

IMPACT OF EVENT SCALE (revised) – SCORING

Subscales:

_____ /8 = _____
Avoidance = mean of (8) items: 5, 7, 8, 11, 12, 13, 17, 22

_____ /7 = _____
Intrusion = mean of (7) items: 1, 2, 3, 6, 9, 16, 20

_____ /7 = _____
Hyperarousal = Mean of (7) items: 4, 10, 14, 15, 18, 19, 21

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Chapter 13 – The Impact of Event Scale – Revised

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