NCCN DISTRESS THERMOMETER
Distress is an unpleasant experience of a mental, physical, social, or spiritual nature. It can affect the way you think, feel, or act. Distress may make it harder to cope with having cancer, its symptoms, or its treatment.

Instructions: Please circle the number (0–10) that best describes how much distress you have been experiencing in the past week including today.

Extreme distress

No distress

PROBLEM LIST
Please indicate if any of the following has been a problem for you in the past week including today. Be sure to check YES or NO for each.

YES NO Practical Problems
☐ ☐ Child care
☐ ☐ Food
☐ ☐ Housing
☐ ☐ Insurance/financial
treatment
☐ ☐ Transportation
☐ ☐ Work/school
☐ ☐ Treatment decisions

Family Problems
☐ ☐ Dealing with children
☐ ☐ Dealing with partner
☐ ☐ Ability to have children
☐ ☐ Family health issues

Emotional Problems
☐ ☐ Depression
☐ ☐ Fears
☐ ☐ Nervousness
☐ ☐ Sadness
☐ ☐ Worry
☐ ☐ Loss of interest in usual activities

☐ ☐ Spiritual/religious concerns

YES NO Physical Problems
☐ ☐ Appearance
☐ ☐ Bathing/dressing
☐ ☐ Breathing
☐ ☐ Changes in urination
☐ ☐ Constipation
☐ ☐ Diarrhea
☐ ☐ Eating
☐ ☐ Fatigue
☐ ☐ Feeling swollen
☐ ☐ Fevers
☐ ☐ Getting around
☐ ☐ Indigestion
☐ ☐ Memory/concentration
☐ ☐ Mouth sores
☐ ☐ Nausea
☐ ☐ Nose dry/congested
☐ ☐ Pain
☐ ☐ Sexual
☐ ☐ Skin dry/itchy
☐ ☐ Sleep
☐ ☐ Substance use
☐ ☐ Tingling in hands/feet

Other Problems: __________________________________________