

## The Medical Fear Survey

The following situations are known to cause some people to experience fear and apprehension. Please rate for each situation listed, how much **fear** or **tension** you would experience if you were exposed to that situation at this time. Use the following scale to evaluate each situation and place a mark (X) in the space corresponding to how much **fear** or **tension** you would experience in the listed situation.

**0** = No fear or concern at all, **1** = Mild fear, **2** = Considerable fear, **3** = Intense fear

How Much Fear or Discomfort Would You Experience From:    0        1        2        3

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1. cutting with a hunting knife	_____	_____	_____	_____
2. seeing a small vial of your own blood	_____	_____	_____	_____
3. observing someone chop with an axe	_____	_____	_____	_____
4. feeling like you will faint	_____	_____	_____	_____
5. seeing a small test tube of animal blood	_____	_____	_____	_____
6. feeling pains in your chest	_____	_____	_____	_____
7. observing a surgical amputation	_____	_____	_____	_____
8. receiving a hypodermic injection in the arm	_____	_____	_____	_____
9. having a severe headache	_____	_____	_____	_____
10. seeing a mutilated body on TV	_____	_____	_____	_____
11. seeing a small bottle of human blood on TV	_____	_____	_____	_____
12. having blood drawn from your arm	_____	_____	_____	_____
13. observing someone operate a power saw	_____	_____	_____	_____
14. seeing a large bottle of your own blood	_____	_____	_____	_____
15. handling a butcher knife	_____	_____	_____	_____
16. having a blood sample drawn from your finger tip	_____	_____	_____	_____
17. handling an open pocket knife	_____	_____	_____	_____
18. seeing someone receiving an injection in the arm	_____	_____	_____	_____
19. seeing a bleeding wound to a person's eye	_____	_____	_____	_____
20. feeling your heart race for no obvious reason	_____	_____	_____	_____
21. seeing the mutilated body of a dog that had been run over by a car	_____	_____	_____	_____
22. feeling odd tingling in your arm	_____	_____	_____	_____
23. seeing photos of wounded soldiers from war	_____	_____	_____	_____
24. feeling nauseated	_____	_____	_____	_____
25. seeing a small vial of human blood	_____	_____	_____	_____

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Scoring: INJECTIONS & BLOOD DRAWS (#8, 12, 16, 18); SHARP OBJECTS (#1, 3, 13, 15, 17); EXAMINATIONS & SYMPTOMS (#4, 6, 9, 20, 22, 24); BLOOD (#2, 5, 11, 14, 25); MUTILATION (#7, 10, 19, 21, 23).