



# Are you Burning Out?

(Adapted from the Freudenberger Burnout Scale)

This tool is intended to help you begin to explore whether the feelings, thoughts or behaviors you may be experiencing could be burnout. It is not intended to take the place of a professional evaluation or to serve as a diagnosis.

This is a Burnout screening tool, adapted from the Freudenberger Burnout Scale. It can help you find out if you might have burnout that needs treatment. It calculates how many common symptoms you have, and based on your answers, suggests where you might be on a scale, from “you’re fine” to burnout that could be affecting your wellbeing and you should seek support right away.

**Have you noticed changes in yourself over the past 6 months?**

**Assign a number from 0 (for no or little change) to 5 (for a great deal of change) for each of the following questions.**

**(This test is not meant to replace a clinical assessment.)**

- 1. Do you tire more easily? Feel fatigue rather than energetic?**
  - 0 – no change
  - 1 – very little change
  - 2 – noticeable change
  - 3 – moderate change
  - 4 – change interfering with daily functioning
  - 5 – significant change
- 2. Are people annoying you by telling you, “You don’t look so good lately?”**
  - 0 – no change
  - 1 – very little change
  - 2 – noticeable change
  - 3 – moderate change
  - 4 – change interfering with daily functioning
  - 5 – significant change

**3. Are you working harder and harder and accomplishing less and less?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**4. Are you incredibly cynical and disenchanted?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**5. Are you often invaded by a sadness you can't explain?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**6. Are you forgetting things? (appointments, deadlines, personal possessions?)**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**7. Are you increasingly irritable? More short-tempered? More disappointed in the people around you?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**8. Are you increasingly irritable? More short-tempered? More disappointed in the people around you?**

- 0 – no change
- 1 – very little change
- 2 – noticeable change
- 3 – moderate change
- 4 – change interfering with daily functioning
- 5 – significant change

**9. Are you seeing close friends and family members less frequently?**

- 0 – no change
- 1 – very little change
- 2 – noticeable change
- 3 – moderate change
- 4 – change interfering with daily functioning
- 5 – significant change

**10. Are you too busy to do even routine things like making phone calls or reading reports or sending out Christmas or other cards?**

- 0 – no change
- 1 – very little change
- 2 – noticeable change
- 3 – moderate change
- 4 – change interfering with daily functioning
- 5 – significant change

**11. Are you suffering from physical complaints> (aches, pains, headaches, lingering cold?)**

- 0 – no change
- 1 – very little change
- 2 – noticeable change
- 3 – moderate change
- 4 – change interfering with daily functioning
- 5 – significant change

**12. Do you feel disoriented when the activity of the day comes to a halt?**

- 0 – no change
- 1 – very little change
- 2 – noticeable change
- 3 – moderate change
- 4 – change interfering with daily functioning
- 5 – significant change

**13. Is joy elusive?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**14. Does sex seem like it's more trouble than it's worth?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
- 4 – change interfering with daily functioning**
- 5 – significant change**

**15. Do you have very little to say to people?**

- 0 – no change**
- 1 – very little change**
- 2 – noticeable change**
- 3 – moderate change**
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- 5 – significant change**

(Developed from materials downloaded on 10/9/2007 from <http://sarbc.org/ciss8.html> where it was adapted from The Freudenberger Burnout Scale.)



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Your score is: \_\_\_\_\_

### What does my score mean?

**0-25** - You’re fine.

**26-35** - There are things you should be watching.

**36-50** - You’re a candidate for burnout.

**51-65** - You are burning out.

**Over 65** - You sound burned out; a situation that may be threatening to your physical and mental well-being.

Don't let a high total score alarm you, but pay attention to it. Burnout is reversible, no matter how far along it is.

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