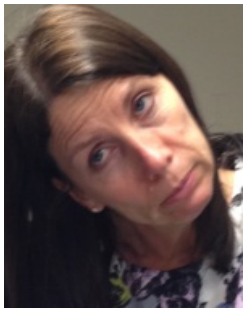
Glasgow Antipsychotic Side-effect Scale (GASS)

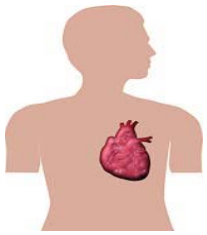
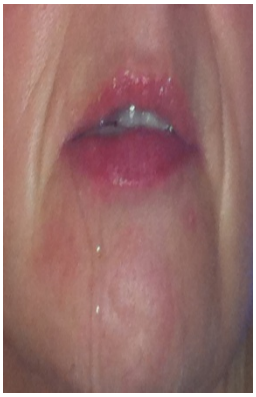
Name:	**Age:**	**Male:** **Female:**	**Date:**

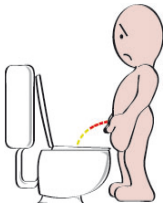
This is to find out how you have been recently. It is to find out if you have had any side effects from your medication.

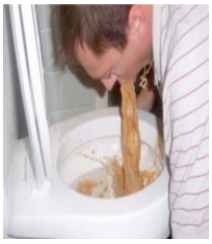
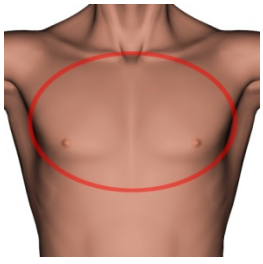
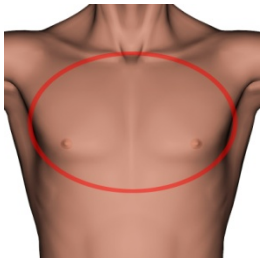
Please place a tick ☑ in the column if you have experienced any of the following side effects.

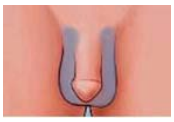
Tick ☑ the **end** box if you found that the side effects upset you.

	Over the **past week:**	Never	Once	A few times	Every day	Tick this box if it upsets you
	I felt sleepy during the day					
	I felt drugged or like a zombie					
	I felt dizzy when I stood up and/or have fainted					

	Over the **past week:**	Never	Once	A few times	Every day	Tick this box if it upsets you
	I have felt my heart beating **faster**					
	My muscles have been tense or jerky					
	My hands or arms have been **shaky**					
	My legs have felt restless and/or I couldn't sit still					
	I have been drooling					

	Over the **past week:**	Never	Once	A few times	Every day	Tick this box if it upsets you
	My movements or walking have been **slower**					
	I have had, or people have noticed movements of my face or body					
	My vision has been blurry					
	My mouth has been dry					
	I have had difficulty passing urine					

	Over the **past week:**	Never	Once	A few times	Every day	Tick this box if it upsets you
	I have felt sick or have vomited					
	I have wet the bed					
	I have been **very** thirsty and/or passing urine frequently					
	The areas around my nipples have been **sore and swollen**					
	I have noticed **fluid** coming from my nipples					

	Over the **past week:**	Never	Once	A few times	Every day	Tick this box if it upsets you
	I have had problems enjoying sex					
	**<u>Men only</u>**: I have had problems getting an erection					

Tick yes or no for the following questions about the **<u>last three months</u>**		No	Yes	Tick if distressing
	**<u>Women only</u>**: I have noticed a change in my periods			
	**<u>Men and women</u>**: I have been gaining weight			