

INVENTORY OF NEGATIVE THOUGHTS IN RESPONSE TO PAIN*

NAME: _____

DATE: _____

People who have persistent pain often have flare-ups of their pain. Flare-ups are times when pain increases and is difficult to cope with. These pain flare-ups may last for hours or days.

During flare-ups people are likely to have a number of negative thoughts. To help us understand your response to pain we would like to know how often you have different negative thoughts when you experience a flare-up.

Below is a list of negative thoughts that people have reported having during pain flare-ups. We would like you to read each one, and then check one of the boxes that describes how often you have that thought during a flare-up of your pain. Check only one box for each thought and do not skip any items.

N S S O A
E E O F L
V L M T W
E D E E A
R O T N Y
 M I S
 M
 E
 S

SAMPLE: I can't deal with this.....

- | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. I am useless. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. No one cares about my pain. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I've injured myself again. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Other people do not believe I have pain. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Other people have to do everything for me. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. My pain is getting worse. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. I can't stand depending on my family and friends anymore. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. I cannot control this pain. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. It is my own fault I hurt like this. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. I am afraid to do anything. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. My family has taken over all of my responsibilities. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. I am going to become an invalid. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Note. From "The Relationship of Negative Thoughts to Pain and Psychological Distress" by K. M. Gill, D. A. Williams, F. J. Keefe, and J. C. Beckham, 1990, *Behavior Therapy*, 21, pp. 349-362.