Corah’s Dental Anxiety Scale, Revised (DAS-R)

Name ___________________________ Date ________________

1. If you had to go to the dentist tomorrow for a check-up, how would you feel about it?
a. I would look forward to it as a reasonably enjoyable experience.
b. I wouldn’t care one way or the other.
c. I would be a little uneasy about it.
d. I would be afraid that it would be unpleasant and painful.
e. I would be very frightened of what the dentist would do.

2. When you are waiting in the dentist's office for your turn in the chair, how do you feel?
a. Relaxed.
b. A little uneasy.
c. Tense.
d. Anxious.
e. So anxious that I sometimes break out in a sweat or almost feel physically sick.

3. When you are in the dentist's chair waiting while the dentist gets the drill ready to begin working on your teeth, how do you feel?
a. Relaxed.
b. A little uneasy.
c. Tense.
d. Anxious.
e. So anxious that I sometimes break out in a sweat or almost feel physically sick.

4. Imagine you are in the dentist's chair to have your teeth cleaned. While you are waiting and the dentist or hygienist is getting out the instruments which will be used to scrape your teeth around the gums, how do you feel?
a. Relaxed.
b. A little uneasy.
c. Tense.
d. Anxious.
e. So anxious that I sometimes break out in a sweat or almost feel physically sick.

a = 1, b = 2, c = 3, d = 4, e = 5 Total possible = 20

• < 9 = mild
• 9 - 12 = moderate anxiety
• 13 - 14 = high anxiety
• 15 - 20 = severe anxiety (or phobia).