Body Perception Questionnaire Autonomic Symptoms Short Form (BPQ-20 ANS)

## Stephen W. Porges © 1993, 2015

In your daily life, how often are you aware of the following sensations? Please rate yourself on each of the statements below:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | NEVER | OCCASIONALLY | | | SOMETIMES | | USUALLY | | ALWAYS |
| 1 | I have difficulty coordinating breathing and eating. | 1 | | 2 | 3 | | 4 | | 5 | |
| 2 | When I am eating, I have difficulty talking. | 1 | | 2 | 3 | | 4 | | 5 | |
| 3 | My heart often beats irregularly. | 1 | | 2 | 3 | | 4 | | 5 | |
| 4 | When I eat, food feels dry and sticks to my mouth and throat. | 1 | | 2 | 3 | | 4 | | 5 | |
| 5 | I feel shortness of breath. | 1 | | 2 | 3 | | 4 | | 5 | |
| 6 | I have difficulty coordinating breathing with talking. | 1 | | 2 | 3 | | 4 | | 5 | |
| 7 | When I eat, I have difficulty swallowing, chewing, and/or sucking with breathing. | 1 | | 2 | 3 | | 4 | | 5 | |
| 8 | I have a persistent cough that interferes with my talking and eating. | 1 | | 2 | 3 | | 4 | | 5 | |
| 9 | I gag from the saliva in my mouth. | 1 | | 2 | 3 | | 4 | | 5 | |
| 10 | I have chest pains. | 1 | | 2 | 3 | | 4 | | 5 | |
| 11 | I gag when I eat. | 1 | | 2 | 3 | | 4 | | 5 | |
| 12 | When I talk, I often feel I should cough or swallow the saliva in my mouth. | 1 | | 2 | 3 | | 4 | | 5 | |
| 13 | When I breathe, I feel like I cannot get enough oxygen. | 1 | | 2 | 3 | | 4 | | 5 | |
| 14 | I have difficulty controlling my eyes. | 1 | | 2 | 3 | | 4 | | 5 | |
| 15 | I feel like vomiting. | 1 | | 2 | 3 | | 4 | | 5 | |
| 16 | I have ‘sour’ stomach. | 1 | | 2 | 3 | | 4 | | 5 | |
| 17 | I am constipated. | 1 | | 2 | 3 | | 4 | | 5 | |
| 18 | I have indigestion. | 1 | | 2 | 3 | | 4 | | 5 | |
| 19 | After eating I have digestion problems. | 1 | | 2 | 3 | | 4 | | 5 | |
| 20 | I have diarrhea. | 1 | | 2 | 3 | | 4 | | 5 | |

**AUTONOMIC SYMPTOMS SELF-SCORING**

1. **INSTRUCTIONS**

Add up your values for all questions. This is your total autonomic symptoms score: \_\_\_\_\_\_\_\_\_\_

1. **HOW DO I INTERPRET MY SCORE?**

The autonomic nervous system coordinates how the human brain and body work together to react to challenges in everyday life. Sometimes autonomic reactions may happen without your awareness, though you may feel the effects in specific parts of your body. At certain times in their life, these body reactions may be sensitive and easily triggered. This score provides a measure of how often your body’s autonomic stress response is activated.

Total scores of **42 or lower (80th percentile)** suggest that your autonomic stress response system activates only occasionally.

Total scores **higher than 42** suggest that your autonomic stress response system may be active often. This may be normal if this is a time of high stress for you.

**For questions or inquiries, please contact:**

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Background pattern

Description automatically generated