

Over the last 2 weeks, how often have you been bothered by the following problems?		Not at all	Several days	More than half of the days	Nearly everyday
Depression Screening					
1	Little interest or pleasure in doing things	0	1	2	3
2	Feeling down, depressed, or hopeless	0	1	2	3
PHQ-9 Depression Assessment					
3	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4	Feeling tired or having little energy	0	1	2	3
5	Poor appetite or overeating	0	1	2	3
6	Feeling bad about yourself - or that you are a failure or have let yourself or your family down	0	1	2	3
7	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8	Moving or speaking so slowly that other people could have noticed, or the opposite - being so fidgety or restless that you have been moving a lot more than usual	0	1	2	3
9	Thoughts that you would be better off dead, or of hurting yourself in some way	0	1	2	3
10	If you check off any of these problems how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people? 0 - Not difficult 1 - Somewhat difficult 2 - Very difficult 3 - Extremely difficult	0	1	2	3

Guide for Interpreting PHQ-9 Scores		
Score	Depression Severity	Action
0-4	None-minimal	Patient may not need depression treatment.
5-9	Mild	Use clinical judgment about treatment, based on patient's duration of symptoms and functional impairment.
10-14	Moderate	Use clinical judgment about treatment, based on patient's duration of symptoms and functional impairment.
15-19	Moderately severe	Treat using antidepressants, psychotherapy, or a combination of treatment.
20-27	Severe	Treat using antidepressants with or without psychotherapy.