PHQ-15

** indicates a required field*

During the **past 4 weeks**, how much have you been bothered by any of the following problems?

*** 1. Stomach pain**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 2. Back pain**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 3. Pain in your arms, legs, or joints (knees, hips, etc.)**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 4. Menstrual cramps or other problems with your periods**

- Not applicable
- Not bothered at all
- Bothered a little
- Bothered a lot

*** 5. Headaches**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 6. Chest pain**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 7. Dizziness**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 8. Fainting spells**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 9. Feeling your heart pound or race**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 10. Shortness of breath**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 11. Pain or problems during sexual intercourse**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 12. Constipation, loose bowels, or diarrhea**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 13. Nausea, gas, or indigestion**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 14. Feeling tired or having low energy**

- Not bothered at all
- Bothered a little
- Bothered a lot

*** 15. Trouble sleeping**

- Not bothered at all
- Bothered a little
- Bothered a lot

Kroenke, K., Spitzer, R. L., & Williams, J. B. (2002). The PHQ-15: validity of a new measure for evaluating the severity of somatic symptoms. Psychosomatic medicine, 64(2), 258–266.