PHQ-9 DEPRESSION SELF-ASSESSMENT FORM

NAME:						
	FEELING DOWN DEDDESSED IDDITABLE			8.	MOVING OR SPEAKING SLOWLY OR	
1.	FEELING DOWN, DEPRESSED, IRRITABLE, OR HOPELESS?				OPPOSITE, BEING TOO FIDGETY OR	
			AT ALL		RESTLESS?	
	_		ERAL DAYS		-	NOT AT ALL
		_	RE THAN HALF THE DAYS		_	SEVERAL DAYS
						MORE THAN HALF THE DAYS
2			RLY EVERY DAY ST OR PLEASURE IN DOING	_		NEARLY EVERY DAY
2.	THINGS?			9.	THOUGHTS YOU WOULD BE BETTER OFF DEAD OR HURTING SELF?	
	□ NOT AT ALL					NOT AT ALL
			ERAL DAYS			
			RE THAN HALF THE DAYS		_	SEVERAL DAYS
	_		ARLY EVERY DAY		_	MORE THAN HALF THE DAYS
•						NEARLY EVERY DAY
3.	TROUBLE FALLING ASLEEP, OR SLEEPING TOO MUCH DUE TO ANXIETY?			10. IN THE PAST YEAR HAVE YOU FELT		
				DEPRESSED OR SAD MOST DAYS?		
					_	YES
			ERAL DAYS RE THAN HALF THE DAYS			NO
				11.		OULT HAVE THESE PROBLEMS OWORK OR GET ALONG WITH
	□ NEARLY EVERY DAY					WORK OR GET ALONG WITH
4.	POOR APPETITE, WEIGHT LOSS OR OVEREATING DUE TO SADNESS?				OTHERS?	NOT AT ALL
			T AT ALL			SEVERAL DAYS
	П	500	ERAL DAYS		\$ 	MORE THAN HALF THE DAYS
			RE THAN HALF THE DAYS		0.55	NEARLY EVERY DAY
	П	100000	ARLY EVERY DAY	12		T MONTH HAVE YOU HAD
5.	_	FEELING TIRED, OR HAVING LITTLE ENERGY		SERIOUS THOUGHTS ABOUT ENDING YOUR		
Э.	DUE TO SADNESS?				LIFE?	looding About 2.15.110 (10.11)
			T AT ALL		19 70 1 (1770 178)	NO
			/ERAL DAYS			YES
	П		ORE THAN HALF THE DAYS			
	П		ARLY EVERY DAY	13	HAVE YOU	EVER TRIED TO KILL YOURSELF?
6.						¬ NO
0.	LIKE A FAILURE?				-	YES
	□ NOT AT ALL				J 123	
	П	SEV	/ERAL DAYS			
	П	MC	DRE THAN HALF THE DAYS			
		NE	ARLY EVERY DAY			
7.	TROUBLE CONCENTRATING ON THINGS					
	LIKE SCHOOL, READING, OR WATCHING					
	TV?					
			NOT AT ALL			
			SEVERAL DAYS			
			MORE THAN HALF THE DAYS			
			NEARLY EVERY DAY			