



DEPRESSION SCREEN (Patient Health Questionnaire 2 and 9)

- The PHQ 9 is a validated questionnaire that reviews the 9 key symptoms of depression based on the DSM diagnostic criteria for major depression.
- The PHQ 2 is the first 2 questions in the PHQ 9: lack of interest in activities and depressed mood. This has been shown to be effective in screening for depression. It is important not to paraphrase the questions.
- First start by asking about the presence of a symptom, then determine the persistence (2 weeks or more), then determine the severity of symptoms.
- Example: I am going to ask you a series of questions about your mood. Some of these may sound different or even extreme, but these are standard questions we ask all individuals. Please answer them as best as you can. Please indicate in the last 2 weeks if you have felt this: not at all, several days, more than half the days or nearly every day.
- PHQ2: In the last 2 weeks...
 - Have you had little interest or pleasure in doing things?
 - Have you been feeling down, depressed or hopeless?
- PHQ9: In the last 2 weeks...
 - Have you had little interest or pleasure in doing things?
 - Have you been feeling down, depressed or hopeless?
 - Have you had trouble falling or staying asleep or sleeping too much?
 - Have you been feeling tired or have little energy?
 - Have you had a poor appetite or have been overeating?
 - Have you been feeling bad about yourself, or that you are a failure or have let yourself or family down?
 - Have you had trouble concentrating on things, such as reading the newspaper or watching TV?
 - Have you been speaking or moving so slowly that other people could have noticed? Or the opposite – have you been so fidgety or restless that you have been moving around a lot more than usual?
 - Have you had thoughts that you would be better off dead, or of hurting yourself in some way?
- Consider Major Depressive disorder:
 - If there are at least 5 positives in the shaded area (one of which corresponds to Question #1 or #2)
- Consider Other Depressive disorder
 - If there are 2-4 positives in the shaded area (one of which corresponds to Question #1 or #2)

Interpretation of Total Score

Total Score	Depression Severity
1-4	No depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

PHQ-9 is adapted from PRIME MD TODAY, developed by Drs Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer Inc.



PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____ DATE: _____

Over the last 2 weeks, how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
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 around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3

PHQ-2

PHQ-9

add columns + +

(Healthcare professional: For interpretation of TOTAL, please refer to accompanying scoring card). TOTAL:

10. If you checked off any 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?	Not difficult at all	_____
	Somewhat difficult	_____
	Very difficult	_____
	Extremely difficult	_____

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