

# Physicians Depression Questionnaire\*

Over the last 2 weeks, how often have you been bothered by any of the following problems?

**1. Little interest or pleasure in doing things.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

**2. Feeling down or depressed.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

**3. Trouble falling or staying asleep, or sleeping too much.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

**4. Feeling tired or having little energy.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

**5. Poor appetite or overeating.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

**6. Feeling bad about yourself - or that you are a failure or have let yourself or your family down.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

7. **Trouble concentrating on things, such as reading the newspaper or watching television.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	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.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

9. **Thoughts that you would be better off dead or of hurting yourself in some way.**

§	Not at All	0
§	Several Days	1
§	More than half the days	2
§	Nearly every day	3

## Total Score

### Interpreting Scores:

This questionnaire estimates the overall severity of depression experienced by the patient according to the categories shown in the table below. If you scored in the 10-14 range, you should probably seek treatment. If you scored a 15 or higher, seeking treatment is strongly recommended.

<u>Raw score</u>	<u>Range of severity</u>
<b>0-5</b>	<b>Not Present</b>
<b>5-9</b>	<b>Minimal</b> symptoms of depression reported
<b>10-14</b>	<b>Moderate</b> symptoms of depression reported
<b>15-19</b>	<b>Moderately Severe</b> symptoms of depression reported
<b>20-27</b>	<b>Severe</b> symptoms of depression reported

*\* This test is not a diagnosis, but a screening tool. If you screen positive please inform your physician to discuss further evaluation and/or treatment.*