

## PHQ-9

Identifier

Date

Please read each statement and write a response which indicates how often you have been bothered by the following problems **over the last two weeks**. There are no right or wrong answers. Do not spend too much time on any one statement. This assessment is not intended to be a diagnosis. If you are concerned about your results in any way, please speak with a qualified health professional.

0 = Not at all    1 = Several days    2 = More than half the days    3 = Nearly every day

1 Little interest or pleasure in doing things

2 Feeling down, depressed, or hopeless

3 Trouble falling or staying asleep, or sleeping too much

4 Feeling tired or having little energy

5 Poor appetite or overeating

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

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

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?

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

If you identified any problems on this questionnaire so far, 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?

10

Total PHQ-9 score =

Privacy - please note - this form neither saves nor transmits any information about you or your assessment scores. If you wish to keep your results you will need to print this document. These results are intended as a guide to your health and are presented for educational purposes only. They are not intended to be a clinical diagnosis. If you are concerned in any way about your health, please consult with a qualified health professional.

Document Version: 2.1

Last Updated: 14 December 2010

Planned Review: 14 December 2015

### **Scoring Guide**

<b>None</b>	<b>Mild</b>	<b>Moderate</b>	<b>Moderately severe</b>	<b>Severe</b>
0 - 4	5 - 9	10 - 14	15 - 19	20 - 27

The maximum score of the PHQ-9 is 27, lower scores are better. Depression severity is calculated by assigning scores of 0, 1, 2 and 3, to the response categories of: ‘not at all’; ‘several days’; ‘more than half the days’ and ‘nearly every day’ respectively. **Only the first nine questions are scored** by adding the scores of the individual items. The final question, the ‘difficulty’ item, is not used in calculating any score or diagnosis; but rather represents the patient’s global impression of symptom-related impairment. It is strongly associated with both psychiatric symptom severity and health-related quality of life. Scores of 5, 10, 15, and 20 represent cut-off points for ‘mild’, ‘moderate’, ‘moderately severe’ and ‘severe’ depression respectively.

‘Major depression’ is suggested if questions (1) or (2), and five or more of questions (1) to (9) are scored as at least ‘more than half the days’. ‘Other depression’ is suggested if questions (1) or (2) and two, three or four of questions (1) to (9) are scored as at least ‘more than half the days’. **Any response other than ‘not at all’ to question 9 requires immediate further follow-up.**

<b>PHQ-9 Score</b>	<b>Depression Severity</b>	<b>Proposed Treatment Actions <sup>1</sup></b>
00 – 04	None or minimal	None
05 – 09	Mild	Watchful waiting; repeat PHQ-9 at follow-up
10 – 14	Moderate	Treatment plan considering counselling, follow-up and / or pharmacotherapy
15 – 19	Moderately Severe	Active treatment with pharmacotherapy and / or psychotherapy
20 – 27	Severe	Immediate initiation of pharmacotherapy and, if severe impairment or poor response to therapy, expedited referral to a mental health specialist for psychotherapy and / or collaborative management

From the Primary Care Evaluation of Mental Disorders Patient Health Questionnaire (PRIME-MD PHQ). The PHQ was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues. PRIME-MD® is a trademark of Pfizer Inc. Copyright© 1999 Pfizer Inc. All rights reserved.

1 Kroenke K, Spitzer RL, Psychiatric Annals 2002; 32:509-521.