**PATIENT HEALTH QUESTIONNAIRE (PHQ-9)**

 **NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

*(Please circle the appropriate number 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 |
| 1. Feeling down, depressed or hopeless
 | 0 | 1 | 2 | 3 |
| 1. Trouble falling or staying asleep or sleeping too much
 | 0 | 1 | 2 | 3 |
| 1. Feeling tired or having little energy
 | 0 | 1 | 2 | 3 |
| 1. Poor appetite or overeating
 | 0 | 1 | 2 | 3 |
| 1. Feeling bad about yourself or that you are a failure or have let yourself or your family down.
 | 0 | 1 | 2 | 3 |
| 1. Trouble concentrating on things, such as reading the newspaper or watching television
 | 0 | 1 | 2 | 3 |
| 1. Moving or speaking so slowly that other people 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 |
| 1. Thoughts that you would be better off dead or of hurting yourself.
 | 0 | 1 | 2 | 3 |
| **Column Total: ....** |  |  |  |  |
|  **Total: ....**  |  |

|  |  |  |
| --- | --- | --- |
| 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? *(Please ✓ in appropriate box)* | Not difficult at all |  |
| Somewhat difficult |  |
| Very difficult |  |
| Extremely difficult |  |

**GAD-7**

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

*(Please circle the appropriate number to indicate your answer)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not at all | Several Days | More than half the days | Nearly every day |
| 1. Feeling nervous, anxious or on edge
 | 0 | 1 | 2 | 3 |
| 1. Not being able to stop or control worrying
 | 0 | 1 | 2 | 3 |
| 1. Worrying too much about different things
 | 0 | 1 | 2 | 3 |
| 1. Trouble relaxing
 | 0 | 1 | 2 | 3 |
| 1. Being so restless that it is hard to sit still
 | 0 | 1 | 2 | 3 |
| 1. Becoming easily annoyed or irritable
 | 0 | 1 | 2 | 3 |
| 1. Feeling afraid as if something awful might happen
 | 0 | 1 | 2 | 3 |
| **Column Total: ....** |  |  |  |  |
|  **Total: ....**  |  |