Patient Health Questionnaire and General Anxiety Disorder (PHQ-9 and GAD-7)

Date	Patient	Name:		Date of Bir	th:	
Over the <u>last</u> Please circle	2 weeks, how of your answers.	ten have you been bothered by any	of the fo	lowing pro	oblems?	
PHQ-9				Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things.				1	2	3
2. Feeling d	own, depressed, d	or hopeless.	0	1	2	3
3. Trouble fa	alling or staying as	sleep, or sleeping too much.	0	1	2	3
Feeling tired or having little energy.				1	2	3
5. Poor appetite or overeating.				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
Trouble concentrating on things, such as reading the newspaper or watching television.			0	1	2	3
noticed. 0 have bee	Or the opposite – In moving around	wly that other people could have being so fidgety or restless that you a lot more than usual.	0	1	2	3
		e better off dead, or of hurting	0	1	2	3
yourself ii	n some way.		<u> </u>	<u> </u>		
yourselfil	n some way.	Add the score for each column Total S	Score (ad	d your col	umn scores):	
f you checked get along with		Total S , how difficult have these made it for y	ou to do		take care of things	at home, or
f you checked get along with Not diff Over the <u>last</u>	l off any problems other people? (Ci icult at all	Total S , how difficult have these made it for y rcle one)	Very D of the fo	your work, ifficult illowing pr	Extremely Inches coblems?	at home, or Difficult Nearly
f you checked get along with Not diff Over the <u>last</u> Please circle	off any problems other people? (Ci icult at all 2 weeks, how of	Total S , how difficult have these made it for y rcle one) Somewhat difficult ten have you been bothered by any	Very D	your work, ifficult llowing pr	Extremely I oblems? ral Over half rs the days	at home, or
f you checked get along with Not diffi Over the <u>last</u> Please circle GAD-7	off any problems other people? (Ci icult at all 2 weeks, how of your answers.	Total S , how difficult have these made it for y rcle one) Somewhat difficult ten have you been bothered by any or on edge.	Very D of the fo	our work, ifficult llowing produced all Seven day	Extremely E coblems? ral Over half rs the days	at home, or Difficult Nearly every day
f you checked get along with Not diffi Over the <u>last</u> Please circle GAD-7 1. Feeling not being	off any problems other people? (Ci icult at all 2 weeks, how of your answers.	Total S , how difficult have these made it for y rcle one) Somewhat difficult ten have you been bothered by any or on edge. ontrol worrying.	Very D of the fo	our work, ifficult llowing produced the service of the service o	Extremely I oblems? ral Over half rs the days	at home, or Difficult Nearly every day 3
f you checked get along with Not diffi Over the <u>last</u> Please circle GAD-7 1. Feeling not being	off any problems other people? (Ci icult at all 2 weeks, how of your answers. ervous, anxious, of able to stop or co too much about of	Total S , how difficult have these made it for y rcle one) Somewhat difficult ten have you been bothered by any or on edge. ontrol worrying.	Very D of the fo	your work, ifficult llowing pr all Seve day	Extremely I coblems? ral Over half the days 2 2	at home, or Difficult Nearly every day 3 3 3
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f you checked get along with Not difference circle GAD-7 1. Feeling notes a Worrying 4. Trouble results 5. Being so 6. Becoming	off any problems other people? (Ci icult at all 2 weeks, how of your answers. ervous, anxious, of able to stop or co too much about of elaxing. restless that it's hig easily annoyed of	Total S , how difficult have these made it for y rcle one) Somewhat difficult ten have you been bothered by any or on edge. ontrol worrying. different things. ard to sit still.	Very D of the fo Not at sure 0 0 0	your work, ifficult llowing pr all Seve day 1 1 1	Extremely I coblems? ral Over half the days 2 2 2 2 2	Nearly every day 3 3 3 3 3

Total Score (add your column scores):

If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people? (Circle one)

Not difficult at all

Somewhat difficult

Very Difficult

Extremely Difficult

PHQ-9* Questionnaire for Depression Scoring and Interpretation Guide

For physician use only

Interpreting PHQ-9 Scores						
Diagnosis	Total Score	For Score	Action			
Minimal depression	0-4	≤ 4	The score suggests the patient may not need depression treatment			
Mild depression Moderate depression	5-9 10-14	514	Physician uses clinical judgment about treatment, based on patient's duration of symptoms and functional impairment			
Moderately severe depression Severe depression	15-19 20-27	> 14	Warrants treatment for depression, using antidepressant, psychotherapy and/or a combination of treatment.			

^{*} The PHQ-9 is described in more detail at the Pfizer website: http://www.phqscreeners.com/

Interpreting Scores				
5-9	mild anxiety			
10-14	moderate anxiety ⁽¹⁾			
15-21	severe anxiety			

⁽¹⁾ When screening for individual or any anxiety disorder, a recommended cut point for further evaluation is a score of 10 or greater.