PHQ-9

Name: _____ Date: _____

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

#	Question	Not at all	Several days	More than half the days	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 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

Total score: _____

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How to score the PHQ-9

- Score each answer: Not at all = 0, Several days = 1, More than half the days = 2, Nearly every day = 3.
- Add the nine scores for a total of 0–27. The final difficulty question is not scored.
- A total of 10 or more is the cutoff most often used to suggest a fuller assessment.
- Any answer above “Not at all” on question 9 needs a conversation about safety, whatever the total.

Severity ranges

0–4	Minimal
5–9	Mild
10–14	Moderate
15–19	Moderately severe
20–27	Severe

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