

# Depression Screening

## INSTRUCTIONS

Please read each one carefully and choose the answer that reflects how much you've been affected by that issue **in the past two weeks**.

### 1. Little interest or pleasure in doing things?

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
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### 2. Feeling down, depressed, or hopeless?

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
- 

### 3. Trouble falling or staying asleep, or sleeping too much?

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
- 

### 4. Feeling tired or having little energy?

- Not at all
- Several days
- More than half the days
- Nearly every day

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### 5. Poor appetite or overeating?

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
- 

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

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
- 

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

- Not at all
  - Several days
  - More than half the days
  - Nearly every day
- 

### 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
- Several days
- More than half the days
- Nearly every day

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

- Not at all
- Several days
- More than half the days
- Nearly every day

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### 10. 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 at all
- Several days
- More than half the days
- Nearly every day

## HOW TO SCORE YOUR ANSWERS

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

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Add up your points for the total score

If you answered "Several days," "More than half the days," or "Nearly every day" to the question 9 you may be at risk of harming yourself or someone else. Please call 911 or visit the nearest hospital immediately. You can also reach the Suicide & Crisis Lifeline at 988. For more information, please consult a healthcare provider.

# What Your Score Means

## FOR SCORES BETWEEN 0 AND 9

Your results suggest **few or no signs of depression**. This screening is not a diagnosis; only a healthcare provider can offer a complete evaluation and differentiate between depression and other conditions. If you're still concerned about your health, it's always best to consult your physician. If you're in immediate distress or considering self-harm, call 911 or visit the nearest emergency room.

## FOR SCORES BETWEEN 10 AND 14

You may be experiencing **mild symptoms of depression**. If these feelings are affecting your daily life, consider seeing a healthcare professional for further evaluation. Treatment can help reduce symptoms and improve your well-being. Speak with your doctor or a mental health provider for guidance.

## FOR SCORES BETWEEN 15 AND 27

Your results indicate **significant symptoms of depression**. It's important to seek help from a doctor or mental health professional as soon as possible. Effective treatments are available to improve your quality of life. Don't hesitate to reach out for support.

**Disclaimer:** Online screening tools are not diagnostic instruments. Please share your results with a physician or healthcare provider. Tava Health is not responsible for any liability, loss, or risk incurred as a consequence, directly or indirectly, from the use and application of this screening tool.

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