Do not write, stamp, punch holes or affix a sticker in this area. To reproduce, follow the printing instructions. Fold only on the dotted lines.

Please use a # 2 pencil

Fill in the complete oval as shown..

## PHQ-A

## PHQ-9 Modified for Teens (ages 11-17)

Please answer every question

Compatible Note form: PHQ-A Clinical Quality Measure Review

PLEASE PRINT PATIENT'S LAST NAME							
Marking Instructions							
a # 2 pencil	PLEASE PRINT PATIENT'S FIRST NAME	PATIENT'S DATE OF BIRTH					
complete oval as shown							

How often have you been bothered by each of the following symptoms during the past two weeks? For each symptom, select the answer that best describes how you have been feeling.

> It is preferred that the patient, rather than accompanying persons, complete this form. It is also preferred that all questions are answered.

		Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things?		0			
2. Feeling down, depressed, irritable, or hopeless?		0	0	0	0
3. Trouble falling asleep, staying asleep, or sleeping too much?		0	0	0	0
4. Feeling tired, or having little energy?		0	0	0	0
5. Poor appetite, weight loss, or overeating?		0	0	0	0
6. Feeling bad about yourself - or feeling that you are a failure, or t you have let yourself or your family down?		0		0	
7. Trouble concentrating on things like school work, reading, or watching TV?				0	
8. Moving or speaking so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you were moving around a lot more than usual?		0	0	0	0
<ol><li>Thoughts that you would be better off dead, or of in some way?</li></ol>	of hurting yourself				
		os o probler	ns made it	for you to	do your
are experiencing any of the problems on this form, , take care of things at home, or get along with other		ese pioblei			
	people?			tremely dif	ficult
, take care of things at home, or get along with other	people?  Very dif	ficult	Ex		ficult
, take care of things at home, or get along with other  Not difficult at all  Somewhat difficult	people?  Very dif  even if you felt okay  Yes  and serious thoughts	ficult sometime	Ex s? No	2?	ficult
, take care of things at home, or get along with other  Not difficult at all  Somewhat difficult e past year have you felt depressed or sad most days	r people?  t Very diff, even if you felt okay Yes  and serious thoughts	ficult sometime	○ Ex	2?	ficult

please discuss this with your Health Care Clinician, go to a hospital emergency room, or call 911.