# TO BE COMPLETED BY TEEN/PATIENT

## Patient Health Questionnaire

## Modified 12 yrs - 18 yrs

Name: _____ DOB: _____

Date: _____

**Instructions: How often have you been bothered by each of the following symptoms DURING THE PAST TWO WEEKS?**
**For each symptom put an "X" in the box beneath the answer that best describes how you have been feeling.**

| | 0 Not At All | 1 Several Days | 2 More Than Half the Days | 3 Nearly Every Day |
|---|---|---|---|---|
| 1. Feeling down, depressed, or hopeless ? | | | | |
| 2. Little interest or pleasure in doing things? | | | | |
| 3. Trouble falling or staying asleep, or sleeping too much? | | | | |
| 4. Poor appetite, weight loss, or overeating? | | | | |
| 5. Feeling tired or having little energy? | | | | |
| 6. Feeling bad about yourself — or that you are a failure or that you have let yourself or your family down? | | | | |
| 7. Trouble concentrating on things, like school work, reading or watching TV? | | | | |
| 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? | | | | |

10. In the ***past year*** have you felt depressed or sad most days, even if you felt okay sometimes: ☐ Yes ☐ No

11. If you are experienceing any of the problems on this form, how difficult have the 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

12. Have there been a time in the past month when you have had serious thoughts about ending your life? ☐ Yes ☐ No

13. Have you ***ever***, in your ***whole life***, tried to kill yourself or made a suicide attempt? ☐ Yes ☐ No

FOR OFFICE USE ONLY Score _____

Q. 12 and 13 = Y or TS = ≥11

Source: Patient Health Questionnaire Modified for Teens (PH-9) (Author: Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagures)

# Skagit Pediatrics, LLP

*** CONFIDENTIAL**

common/reception/PQH-13
updated 08/15/14