

## McLaren Print System Order

Order No: 74180 Reprint Previous Order No: 40560  
 Order Date: 2022-12-15  
 User: Autumn Scherzer  
 Phone: 989-895-4840

Ship Location: McLaren Bay Pediatrics Attn: Autumn  
 1456 W Center Rd Suite 1  
 Essexville , mi 48732

### Forms

Quantity: 500  
 Paragon Dept No: 69640  
 Dept Name: McLaren Bay Regional Pediatrics  
 Company Number: 810

Order Total Price: 0.00

Item Number: MM-3381  
 Item Description: Patient Health Questionnaire (PHQ-&#8208;9)  
 Revision Date: 9/2018  
 Print: 2 sided black and white  
 Paper: 20# White Text  
 Size: 8.5 x 11  
 Fold:  
 Finish: None  
 Drill: None  
 Misc Info: ds; black; bond



Patient Health Questionnaire (PHQ-9)

Patient Name (First, Last) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Review the questions. Circle each answer and calculate the score.

Over the past 2 weeks, how often have you been bothered by any of the following problems?	Not at All	Several Days	More than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	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
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people would have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

Add the Score for Each Column  
 Add Column Totals Together \_\_\_\_\_

10. If you checked 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

The PHQ-9 questionnaire was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, and David B. Saunders, with an advisory group from Duke Univ. Inc.

Reviewed by:  
 Provider's Signature (Required) \_\_\_\_\_ Date & Time (Required) \_\_\_\_\_