

# PHQ-9

## *Patient Health Questionnaire*

### *9 questions*

**Purpose** : Tool for reaching a tentative diagnosis of depression and assessment of its severity.

PHQ-9 is not a screening tool for depression but it is used to monitor the severity of depression and response to treatment. However, it can be used to make a tentative diagnosis of depression.

**Admin time** : 15-20 min

**User Friendly** : High

**Administered by** : Healthcare provider or self-administered

**Content** : The PHQ-9 scores each of the nine DSM-IV criteria as "0" (not at all) to "3" (nearly every day).

The patient self-reports depression-associated symptoms according to their frequency in the past 2 weeks.

The score is calculated by summing the response values for each of the 9 questions.

**Author** : Kroenke K et al,1999

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**Translation** : Available in several languages : [access](#)



<https://www.cgakit.com/p-4-phq9>

# PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

Over the last 2 weeks, how often have you been bothered by any of the following problems?  
(Use "✓" to indicate your answer)

	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 or 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 could 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

FOR OFFICE CODING   0   +        +        +         
=Total Score:       

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

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### *9 questions*

#### **PHQ-9 scoring**

The PHQ-9 consists of nine questions that ask respondents how often they've "been bothered by any of the following problems" in the past two weeks.

The questions address sleep, energy, appetite, and other possible symptoms of depression. Scores are calculated based on how frequently a person experiences these feelings.

Each "not at all" response is scored as 0  
each "several days" response is 1  
each "more than half the days" response is 2  
and each "nearly every day" response is 3  
The sum value of these responses gives the total score.

**1-4:** This is considered *minimal depression*, which suggests that the respondent may not need depression treatment.

**5-9:** This is considered *mild depression*. In response to this result, healthcare providers can use their clinical judgment about treatment based on the duration and severity of symptoms.

**10-14:** This is considered *moderate depression*. Similar to *mild depression*, healthcare providers can use their clinical judgment and knowledge of the patient to determine a course of treatment.

**15-19:** This is considered *moderately severe depression*. This generally warrants treatment for depression using medication, therapy, or a combination of the two.

**20-27:** This is considered *severe depression*. This warrants treatment for depression using medication, therapy, or a combination of the two.