

Patient Health Questionnaire - PHQ-9

| Name: | | | te of Birth: | | | | | |
|---|-------------------------------------|--|--------------|-----------------|----------------------------------|------------------------|--|--|
| Please complete and hand Write the date when you fill | - | • • • | | | t. | | | |
| Over the <u>last 2 weeks</u> , been bothered by any (Please circle or "") | of the following pro | oblems? | Not at | Several days | More than half the days | Nearly every day | | |
| 1. Little interest or pleas | ure in doing things | | 0 | 1 | 2 | 3 | | |
| 2. Feeling down, depres | sed, or hopeless | | 0 | 1 | 2 | 3 | | |
| 3. Trouble falling or much | staying asleep, or | | 0 | 1 | 2 | 3 | | |
| 4. Feeling tired or having | g little energy | | 0 | 1 | 2 | 3 | | |
| 5. Poor appetite or over | eating | | 0 | 1 | 2 | 3 | | |
| 6. Feeling bad about your have let yourself or you | - | | 0 | 1 | 2 | 3 | | |
| 7. Trouble concentration newspaper or watching te | - | _ | 0 | 1 | 2 | 3 | | |
| 8. Moving or speaking have noticed? Or the restless that you have becusual | opposite — being en moving around a | so fidgety or lot more thand or of hurting | 0 | 1 | 2 | 3 | | |
| | | Column | totals: | | · | + | | |
| | | | - | = Total | Score _ | | | |
| If you have been bothered by <u>any</u> of the problems listed above, please answer the following: How <u>difficult</u> 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 | | | remely fficult | | | |

From the Primary Care Evaluation of Mental Disorders Patient Health Questionnaire (PRIME-MD PHQ). The PHQ was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues. All rights reserved. Reproduced with permission

Continued - Please turn over.....



GAD-7

| Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems? (Please circle or "" to indicate your answer) | | Several days | More than half the days | Nearly every day |
|---|---|-----------------|-------------------------|---------------------|
| Feeling nervous, anxious or on edge | 0 | 1 | 2 | 3 |
| Not being able to stop or control worrying | 0 | 1 | 2 | 3 |
| 3. Worrying too much about different things | 0 | 1 | 2 | 3 |
| 4. Trouble relaxing | 0 | 1 | 2 | 3 |
| 5. Being so restless that it is hard to sit still | 0 | 1 | 2 | 3 |
| 6. Becoming easily annoyed or irritable | 0 | 1 | 2 | 3 |
| 7. Feeling afraid as if something awful might happen | 0 | 1 | 2 | 3 |

| Column totals: | | + | + | |
|----------------|---|----------|-----|--|
| | _ | Total So | ore | |

You can use the space below to write down any questions you have for your appointment:

Thank you for completing this! Your answers are confidential. Please return the form to the professional seeing you at the time you are seen for your appointment.

Notes for Professionals

PHQ-9 Depression Severity

Guide to scores (and action) for the 9 items range 0 to 27.

0-4 = none

6-10 = mild (watchful waiting, repeat PHQ-9 at follow up)

11-15 = moderate (consider talking treatments or medication)

16-20 = moderately severe depression (start talking treatments and/or medication)

20-27 = severe depression (start talking treatments and medication, specialist input)

GAD-7 Anxiety Severity.

GAD-7 total score for the seven items ranges from 0 to 21. 0-5 mild 6-10 moderate 11-15 moderately severe anxiety 16-21 severe anxiety.

<u>Use</u>

Use routinely at entry to service (eg sent out with appointment letter) and follow up as appropriate (at discretion of professional eg at 3-6 months and/or discharge from service).

Should only be used as part of a comprehensive assessment, as a guide to care, not as a replacement for the professional's clinical judgement.

Advantages of using rating scales

Ensure symptoms are assessed (re improved diagnosis, treatment and care pathway).

Help determine severity (symptoms and functioning).

Monitor progress.

Recommended by NICE (National Institute of Health and Clinical Excellence) – eg depression (2022), anxiety (2011) and common mental health disorders (2011) as part of the stepped care approach.

Approved as free from need for copyright fees.

Recommended and used routinely by IAPT (Improving access to psychological therapies) – allowing good communication between step 3 (high intensity CBT) and step 4 (specialist care).

Recommended by Trust Mental Health Services as good practice.

Likely to be important in future quality indicators eg PBR with LYPFT.

Reference

NICE-indicated Treatments for Depression & Anxiety http://www.iapt.nhs.uk/silo/files/iapt-data-handbook-appendicies-v2-word-version.doc The IAPT Data Handbook Including the IAPT Data Standard Version 2.0.1 (standards 37 & 38), 2011 http://www.iapt.nhs.uk/search/?keywords=gad+7

Paul Blenkiron Consultant Psychiatrist & BABCP Accredited Therapist