



# Patient Health Questionnaire (PHQ-9)

Horizon Blue Cross Blue Shield of New Jersey

You may complete the required fields below online and then save or print a copy for submission. To save a completed copy to your computer, choose File > Save As to rename the file and save the form with your information to your computer.

Member Name: \_\_\_\_\_  
Last First MI

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MM DD YYYY MM DD YYYY

Please use a check (✓) to indicate your answer.

Over the last two 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	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
2. Feeling down, depressed or hopeless	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
3. Trouble falling/staying asleep or sleeping too much	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4. Feeling tired or having little energy	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
5. Poor appetite or overeating	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
6. Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 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	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

For an interpretation of TOTAL, please refer to the scoring card on the reverse.

add columns: \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

TOTAL: \_\_\_\_\_

10. 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

### The Patient Health Questionnaire (PHQ-9) explained

The Patient Health Questionnaire (PHQ-9) is a brief patient self-reported depression assessment specifically developed for use in primary care. The PHQ-9 has demonstrated usefulness as an assessment tool for the diagnosis of depression in primary care with acceptable reliability, validity, sensitivity and specificity. The nine items on the PHQ-9 come directly from the nine DSM-IV\* signs and symptoms of major depression. The clinician should corroborate the score with clinical determination that a significant depressive syndrome is present.

#### Scoring card for severity determination (for health professional use only)

Add up all checked boxes using the following point values. For every √:

- Not at all = 0
- Several days = 1
- More than half the days = 2
- Nearly every day = 3

#### Interpretation of TOTAL score

TOTAL score	Depression severity
0–4	none
5–9	mild depression
10–14	moderate depression
15–19	moderately severe depression
20–27	severe depression

### PHQ-9 Questionnaire Assessment – For initial diagnosis:

1. Patient completes the PHQ-9 Questionnaire.
2. If there are at least four √ s in the shaded section (including questions 1 and 2), consider a depressive disorder. Add score to determine severity.
3. Consider **Major Depressive Disorder** if there are at least five √ s in the shaded section (one of which corresponds to question 1 or 2). Consider **Other Depressive Disorder** if there are two to four √ s in the shaded section (one of which corresponds to question 1 or 2).

**Note:** Since the questionnaire relies on patient self-report, the clinician should verify all responses. A definitive diagnosis is made on clinical grounds taking in account how well the patient understood the questionnaire, as well as other relevant information from the patient. Diagnoses of major depressive disorder or other depressive disorder also require impairment of social, occupational or other important areas of functioning (question 10) and ruling out normal bereavement, a history of a manic episode (bipolar disorder), a physical disorder, medication or other drug as the biological cause of the depressive symptoms.

### Using the PHQ-9 to assess patient response to treatment

#### Initial response after four weeks of an adequate dose of an antidepressant

PHQ-9	Treatment response	Treatment plan
Drop of five or more points from baseline	Adequate	No treatment change needed. Follow-up in four weeks.
Drop of two to four points from baseline	Possibly inadequate	May warrant an increase in antidepressant dose.
Drop of one point or no change or increase	Inadequate	Increase dose; Augmentation; Switch; Informal or formal psychiatric consultation; Add psychological counseling.

#### Initial response after six weeks of psychological counseling

PHQ-9	Treatment response	Treatment plan
Drop of five or more points from baseline	Adequate	No treatment change needed. Follow-up in four weeks.
Drop of two to four points from baseline	Possibly inadequate	Probably no treatment change needed. Share PHQ-9 with psychotherapist.
Drop of one point or no change or increase	Inadequate	If depression-specific psychological counseling (CBT, PST, IPT**), discuss with therapist, consider adding antidepressant.  For patients satisfied in other psychological counseling, consider starting antidepressant.  For patients dissatisfied in other psychological counseling, review treatment options and preferences.

\* Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition

\*\*CBT = Cognitive-Behavioral Therapy; PST = Problem Solving Treatment; IPT = Interpersonal Therapy

The goal of acute phase treatment is remission of symptoms so that patients will have a reduction of the PHQ-9 to a score less than five. Patients who achieve this goal enter into the continuation phase of treatment. Patients who do not achieve this goal remain in acute phase treatment and require some alteration in treatment (dose increase, augmentation, combination treatment). Patients who do not achieve remission after two adequate trials of antidepressant and/or psychological counseling or by 20 or 30 weeks should have a psychiatric consultation for diagnostic and management suggestions.

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Three Penn Plaza East, Newark, New Jersey 07105.