

DEPRESSION SCREENING TOOL*

Over the last 2 weeks, how often have you been bothered by any of the following problems?

Answers based on a 0-3 score:

0 = Not at all 1 = Several days

2 = More than half the days 3 = Nearly every day

1. Little interest or pleasure in doing things ____
2. Feeling down, depressed, or hopeless ____
3. Trouble falling or staying asleep, or sleeping too much ____
4. Feeling tired or having little energy ____
5. Poor appetite or overeating ____
6. Feeling bad about yourself - or that you are a failure or have let yourself or your family down ____
7. Trouble concentrating on things, such as reading the newspaper or watching television ____
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 ____

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?

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Not difficult
at all | <input type="checkbox"/> Somewhat
difficult | <input type="checkbox"/> Very
Difficult | <input type="checkbox"/> Extremely
difficult |
|--|--|--|---|

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Spot a Stroke - B.E. F.A.S.T.

B

Balance



B is for Balance:

Does the person have a sudden loss of balance?

E

Eyes



E is for Eye:

Has the person lost vision in one or both eyes?

F

Face



F is for Face:

Does the person's face look uneven?

A

Arms



A is for Arm:

Is one arm hanging down?

S

Speech



S is for Speech:

Is the person's speech slurred? Does the person have trouble speaking or seem confused?

T

Time



T is for Time:

Call 911 Now!

Icons taken from <https://www.srmconline.com/stroke-care>

* The information on this document is for educational purposes only and is not intended or implied to be a substitute for professional medical advice, diagnosis or treatment.

Interpretation of Depression Screening

Total Score

1-4
5-9
10-14
15-19
20-27

Depression Severity

Minimal depression
Mild depression
Moderate depression
Moderately severe depression
Severe depression