



# My feelings assessment

## Patient health questionnaire (PHQ-9)

Use this tracker to measure how you're feeling. Circle the number in the box that best describes how often you have encountered these feelings *in the past two weeks*. Then look at the next page to see your results.

**Key:**  
 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	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

**Add columns**

0 + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

**Total score (add column totals)**

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## Patient health questionnaire (PHQ-9) *continued*

### What your answers may mean

*Note: If you chose 2 or 3 for question 9, skip to the bottom section.*

- 0-4** | **It's unlikely you have depression.** People who have clinical depression usually score 5 or higher on this test.
- 5-9** | **You may have mild depression.** It is unlikely that you need treatment at this time, but it may be helpful to learn more about depression.
- 10-14** | **You may have moderate depression that could benefit from treatment.** BCN has behavioral health specialists on staff who can talk with you about treatment options. Or, you may discuss this with your primary care physician.
- 15-19** | **You may have moderately severe depression that would benefit from treatment.** We recommend that you seek a professional evaluation. BCN has behavioral health specialists on staff who can talk with you about treatment options. Or, you may choose to discuss this with your primary care physician. To talk with a behavioral health specialist, call the number on the back of your ID card.
- 20-27** | **Your score of 20-27 (or your score of 2 or 3 on question 9) indicates that you have severe depression that requires treatment.** We recommend that you seek assistance immediately. Call us and speak with a behavioral health specialist. If you feel that your situation may be an emergency, or if you have suicidal thoughts, please go to a hospital emergency room or call **911**. Help is available for you now.

*Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. Copyright © Pfizer Inc. All rights reserved. Reproduced with permission.*



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