

Yesavage Geriatric Depression Scale

The following is a slight alteration of the Yesavage Geriatric Depression Scale, which was developed by Stanford University's Dr. Jerome Yesavage.

Section A

Are you basically satisfied with your life?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you hopeful about the future?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you in good spirits most of the time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel happy most of the time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you think it is wonderful to be alive now?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you find life very exciting?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel full of energy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you enjoy getting up in the morning?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is it easy for you to make decisions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your mind as clear as it used to be?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Section B

Have you dropped many of your activities and interests?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel that your life is empty?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you often get bored?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you bothered by thoughts you can't get out of your head?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you afraid that something bad is going to happen to you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you often feel helpless?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you often get restless and fidgety?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you prefer to stay at home rather than doing new things?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you frequently worry about the future?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel you have more memory problems than others?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you often feel downhearted and blue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel pretty worthless the way you are now?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you worry a lot about the past?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is it hard for you to get started on new projects?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you feel that your situation is hopeless?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you think that most people are better off than you are?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you frequently get upset over little things?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you frequently feel like crying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have trouble concentrating?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you prefer to avoid social gatherings?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Results

In Section A, please assign one point for every No answer.

In Section B, assign one point for each Yes answer. Add up your answers:

- If you have 0-9 points this is considered normal.
- If you have 10-19 points it is considered mildly depressive.
- If you have 20-30 points this is considered severe depressive.