

## PATIENT HEALTH QUESTIONNAIRE- 2 (PHQ-2)

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

(Use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	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

FOR OFFICE CODING 0 + \_\_\_\_\_ =Total Score: \_\_\_\_\_