

## D0150: Resident Mood Interview (PHQ-2 to 9<sup>©</sup>)



### D0150. Resident Mood Interview (PHQ-2 to 9<sup>©</sup>)

**Say to resident: "Over the last 2 weeks, have you been bothered by any of the following problems?"**

If symptom is present, enter 1 (yes) in column 1, Symptom Presence.

If yes in column 1, then ask the resident: "About **how often** have you been bothered by this?"

Read and show the resident a card with the symptom frequency choices. Indicate response in column 2, Symptom Frequency.

**1. Symptom Presence**

- 0. **No** (enter 0 in column 2)
- 1. **Yes** (enter 0-3 in column 2)
- 9. **No response** (leave column 2 blank)

**2. Symptom Frequency**

- 0. **Never or 1 day**
- 1. **2-6 days** (several days)
- 2. **7-11 days** (half or more of the days)
- 3. **12-14 days** (nearly every day)

1. Symptom Presence	2. Symptom Frequency
↓ Enter Scores in Boxes ↓	

**A. Little interest or pleasure in doing things**

<input type="checkbox"/>	<input type="checkbox"/>
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**B. Feeling down, depressed, or hopeless**

<input type="checkbox"/>	<input type="checkbox"/>
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If both D0150A1 and D0150B1 are coded 9, OR both D0150A2 and D0150B2 are coded 0 or 1, END the PHQ interview; otherwise, continue.

**C. Trouble falling or staying asleep, or sleeping too much**

<input type="checkbox"/>	<input type="checkbox"/>
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**D. Feeling tired or having little energy**

<input type="checkbox"/>	<input type="checkbox"/>
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**E. Poor appetite or overeating**

<input type="checkbox"/>	<input type="checkbox"/>
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**F. Feeling bad about yourself - or that you are a failure or have let yourself or your family down**

<input type="checkbox"/>	<input type="checkbox"/>
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**G. Trouble concentrating on things, such as reading the newspaper or watching television**

<input type="checkbox"/>	<input type="checkbox"/>
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**H. 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**

<input type="checkbox"/>	<input type="checkbox"/>
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**I. Thoughts that you would be better off dead, or of hurting yourself in some way**

<input type="checkbox"/>	<input type="checkbox"/>
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