Are you depressed?

This Quick Inventory of Depressive Symptomatology Self Report (QIDS-SR) can help reveal the level of a person’s depression. Directions for scoring the questionnaire and the score key are at the end of the questionnaire.

**Questions 1-5: Please circle the one response to each question that best describes you for the past seven days.**

During the past seven days...

1. **Falling Asleep:**
   - 0 I never take longer than 30 minutes to fall asleep.
   - 1 I take at least 30 minutes to fall asleep, less than half the time.
   - 2 I take at least 30 minutes to fall asleep, more than half the time.
   - 3 I take more than 60 minutes to fall asleep, more than half the time.

2. **Sleep During the Night**
   - 0 I do not wake up at night.
   - 1 I have a restless, light sleep with a few brief awakenings each night.
   - 2 I wake up at least once a night, but I go back to sleep easily.
   - 3 I awaken more than once a night and stay awake for 20 minutes or more, more than half the time.

3. **Waking Up Too Early:**
   - 0 Most of the time, I awaken no more than 30 minutes before I need to get up.
   - 1 More than half the time, I awaken more than 30 minutes before I need to get up.
   - 2 I almost always awaken at least one hour or so before I need to, but I go back to sleep eventually.
   - 3 I awaken at least one hour before I need to, and can't go back to sleep.

4. **Sleeping Too Much:**
   - 0 I sleep no longer than 7-8 hours/night, without napping during the day.
   - 1 I sleep no longer than 10 hours in a 24-hour period including naps.
   - 2 I sleep no longer than 12 hours in a 24-hour period including naps.
   - 3 I sleep longer than 12 hours in a 24-hour period including naps.

5. **Feeling Sad:**
   - 0 I do not feel sad.
   - 1 I feel sad less than half the time.
   - 2 I feel sad more than half the time.
   - 3 I feel sad nearly all of the time.

**Complete either question 6 or 7 – not both.**

6. **Decreased Appetite:**
   - 0 There is no change in my usual appetite.
   - 1 I eat somewhat less often or lesser amounts of food than usual.
   - 2 I eat much less than usual and only with personal effort.
   - 3 I rarely eat within a 24-hour period, and only with extreme personal effort or when others persuade me to eat.

   - OR-

7. **Increased Appetite:**
   - 0 There is no change from my usual appetite.
   - 1 I feel a need to eat more frequently than usual.
   - 2 I regularly eat more often and/or greater amounts of food than usual.
   - 3 I feel driven to overeat both at mealtime and between meals.

**Complete either question 8 or 9 – not both.**

8. **Decreased Weight (Within the Last Two Weeks):**
   - 0 I have not had a change in my weight.
   - 1 I feel as if I have had a slight weight loss.
   - 2 I have lost 2 pounds or more.
   - 3 I have lost 5 pounds or more.

   - OR-

9. **Increased Weight (Within the Last Two Weeks):**
   - 0 I have not had a change in my weight.
   - 1 I feel as if I have had a slight weight gain.
   - 2 I have gained 2 pounds or more.
   - 3 I have gained 5 pounds or more.

Continued on back...
Questions 10-16: Please check the one response to each question that best describes you for the past seven days.

During the past seven days...

10. Concentration / Decision Making:
0 There is no change in my usual capacity to concentrate or make decisions.
1 I occasionally feel indecisive or find that my attention wanders.
2 Most of the time, I struggle to focus my attention or to make decisions.
3 I cannot concentrate well enough to read or cannot make even minor decisions.

11. View of Myself:
0 I see myself as equally worthwhile and deserving as other people.
1 I am more self-blaming than usual.
2 I largely believe that I cause problems for others.
3 I think almost constantly about major and minor defects in myself.

12. Thoughts of Death or Suicide:
0 I do not think of suicide or death.
1 I feel that life is empty or wonder if it's worth living.
2 I think of suicide or death several times a week for several minutes.
3 I think of suicide or death several times a day in some detail, or I have made specific plans for suicide or have actually tried to take my life.

13. General Interest
0 There is no change from usual in how interested I am in other people or activities.
1 I notice that I am less interested in people or activities.
2 I find I have interest in only one or two of my formerly pursued activities.
3 I have virtually no interest in formerly pursued activities.

14. Energy Level:
0 There is no change in my usual level of energy.
1 I get tired more easily than usual.
2 I have to make a big effort to start or finish my usual daily activities (for example, shopping, homework, cooking, or going to work).
3 I really cannot carry out most of my usual daily activities because I just don't have the energy.

15. Feeling Slowed Down:
0 I think, speak, and move at my usual rate of speed.
1 I find that my thinking is slowed down or my voice sounds dull or flat.
2 It takes me several seconds to respond to most questions and I'm sure my thinking is slowed.
3 I am often unable to respond to questions without extreme effort.

16. Feeling Restless:
0 I do not feel restless.
1 I'm often fidgety, wringing my hands, or need to shift how I am sitting.
2 I have impulses to move about and am quite restless.
3 At times, I am unable to stay seated and need to pace around.

How to Score this Questionnaire

Fill out the lines below. Each questionnaire answer has a score (0-3) associated with it.

1. Enter the highest score of questions 1-4 _________
2. Enter score on question 5 _________
3. Enter the highest score of questions 6-9 _________
4. Enter score on item 10 _________
5. Enter score on item 11 _________
6. Enter score on item 12 _________
7. Enter score on item 13 _________
8. Enter score on item 14 _________
9. Enter the highest score on either 15 or 16 _________

Add the scores above for a total score _________

(Total score range 0-27)

Severity of Depression Score Key

- 0-5=None
- 6-10=Mild
- 11-15=Moderate
- 16-20=Severe
- 21-27=Very Severe

If you scored mild to very severe depression, Griffin Hospital’s Psychiatric and Mental Health Services can help. For more information, call (203) 732-7580 or visit www.griffinhealth.org/psychiatricservices.