

Geriatric Depression Scale (Short Form)

Patient's Name: Robert Scott.

Date: 11/6/2009

Instructions: Choose the best answer for how you felt over the past week.

No.	Question	Answer	Score
1.	Are you basically satisfied with your life?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	0
2.	Have you dropped many of your activities and interests?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
3.	Do you feel that your life is empty?	YES / <input checked="" type="radio"/> NO	0
4.	Do you often get bored?	YES / <input checked="" type="radio"/> NO	0
5.	Are you in good spirits most of the time?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	0
6.	Are you afraid that something bad is going to happen to you?	YES / <input checked="" type="radio"/> NO	0
7.	Do you feel happy most of the time?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	0
8.	Do you often feel helpless?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
9.	Do you prefer to stay at home, rather than going out and doing new things?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
10.	Do you feel you have more problems with memory than most?	YES / <input checked="" type="radio"/> NO	0
11.	Do you think it is wonderful to be alive?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	0
12.	Do you feel pretty worthless the way you are now?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
13.	Do you feel full of energy?	YES / <input checked="" type="radio"/> NO	1
14.	Do you feel that your situation is hopeless?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
15.	Do you think that most people are better off than you are?	<input checked="" type="radio"/> YES / <input type="radio"/> NO	1
TOTAL			7

Scoring:

Assign one point for each of these answers:

- | | | | | |
|--------|--------|--------|---------|---------|
| 1. NO | 4. YES | 7. NO | 10. YES | 13. NO |
| 2. YES | 5. NO | 8. YES | 11. NO | 14. YES |
| 3. YES | 6. YES | 9. YES | 12. YES | 15. YES |

7/15

A score of 0 to 5 is normal. A score above 5 suggests depression.

Source:

- Yesavage J.A., Brink T.L., Rose T.L. et al. Development and validation of a geriatric depression screening scale: a preliminary report. J. Psychiatr. Res. 1983; 17:37-49.