At a Glance



Patient Health **Ouestionnaire** (PHQ)

An overview of the PHQ and its use for healthcare settings 1,2

Asking about suicide is vital for healthcare and suicide prevention. Nearly 50% of people who die by suicide see their primary care doctor in the month before their death, and research has found that 25% of people who die by suicide are seen in the emergency room for non-psychiatric reasons in the 12 months prior to their death. The Patient Health Questionnaire (PHQ) is a risk assessment tool for healthcare environments.

¹PHQ-9 Depression Scale | University of Washington AIMS Center, 2022; ²Rossom et al., 2017

What is the assessment and its purpose?

The PHQ-9 is a nine-item depression which includes questions that mirror the diagnostic criteria for Major Depressive Disorder in the DSM-V. The PHQ-9 acts as a screening tool for identification, detection of symptoms, and diagnosis of a person's overall risk of depression and suicidal behavior.

What is the difference between PHQ-2 and PHQ-9?

- The PHQ-2 consists of the first two questions from the PHQ-9.
- The PHQ-2 can be used as a preliminary screening tool prior to the PHQ-9.
- If a patient responds "yes" to either of the two questions on the PHQ-2, the remaining seven questions on the PHQ-9 should be asked.

What types of questions are included on the assessment?

- The tool rates the degree and frequency to which an individual has experienced depressed mood or anhedonia (inability to feel pleasure) over the past two weeks.
- Question 9 on the PHQ-9 screens for the presence and duration of suicidal ideation.

What are the suicide prevention benefits?

The PHQ-9 is a robust predictor of suicide ideation and attempts. The PHQ-9 is:

- Simple. Questions can be asked by a clinician or selfadministered and completed within a few minutes.
- Effective. The PHQ-9 provides an overview of symptom severity to support and confirm a clinician's risk assessment.

- Evidence-supported. Research has validated the relevance and effectiveness of the PHQ-9.
- Universal. The PHQ-9 is suitable for ages 12 and over and is available in over 30 languages.
- Free. The tool is available free of charge for use in community and healthcare settings, as well as in federal funded or nonprofit research.

How do you ask questions on the PHQ-9?

Administrators ask a series of questions about the presence, frequency, and severity of symptoms. Responses are scored on a scale from 0 ("Not at All") to 3 ("Nearly Every Day") and then totaled the across the nine questions. The PHQ-9 uses plain and direct language, which is most effective in eliciting honest and clear responses.

How do you determine next steps?

Once established that a patient is having suicidal attempted thoughts/has suicide, a assessment of suicidal thinking and behavior should be done immediately. An organization can establish criteria or thresholds that determine what to do for person assessed, and decisions hospitalization, counseling, referrals, and other actions can be informed by the responses and other factors (e.g., recency of suicidal thoughts and behaviors). Triage examples and technical assistance are available to assist with next steps.

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