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Goldberg's Depression Scale

Name: _____ Date: _____

0 = Not at all 1 = Just a little 2 = Somewhat 3 = Moderately 4 = Quite a lot 5 = Very much

I do things slowly.	0	1	2	3	4	5
My future seems hopeless.	0	1	2	3	4	5
It is hard for me to concentrate on reading.	0	1	2	3	4	5
The pleasure and joy has gone out of my life.	0	1	2	3	4	5
I have difficulty making decisions.	0	1	2	3	4	5
I have lost interest in aspects of life that used to be important to me.	0	1	2	3	4	5
I feel sad, blue, and unhappy.	0	1	2	3	4	5
I am agitated and keep moving around.	0	1	2	3	4	5
I feel fatigued.	0	1	2	3	4	5
It takes great effort for me to do simple things.	0	1	2	3	4	5
I feel that I am a guilty person who deserves to be punished.	0	1	2	3	4	5
I feel like a failure.	0	1	2	3	4	5
I feel lifeless - - - more dead than alive.	0	1	2	3	4	5
My sleep has been disturbed too little, too much, or broken sleep.	0	1	2	3	4	5
I spend time thinking about HOW I might kill myself.	0	1	2	3	4	5
I feel trapped or caught.	0	1	2	3	4	5
I feel depressed even when good things happen to me.	0	1	2	3	4	5
Without trying to diet, I have lost, or gained, weight.	0	1	2	3	4	5

Comments: _____

Medication: _____
