

Name _____ Today's Date _____

PROS-D SCALE

Circle the Number and *Words that Most Accurately Describe Your Experience

1. **Sad or Depressed Mood**
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

2. **No Interest In Activities*/People***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

3. **Feeling Guilty*/Worthless***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

4. **Energy Problem (Tiredness*/Fatigue*)**
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

5. **Concentration Difficulty**
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

6. **Eating More*/Less***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

7. **Feeling Physically Tense*/Anxious*/Slowed Down***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

8. **Sleeping too Much*/Too Little*/Poorly***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

9. **Thoughts about Suicide*/Death***
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

10. **Somatic Symptoms (Physical Aches*/ Pains*)**
Absent Mild Moderate Severe Extreme
0 _____ 1 _____ 2 _____ 3 _____ 4 _____

Please Answer the Following Questions

1. On this Depression Scale have you rated yourself at 2 or greater on symptoms 1 or 2?
Yes _____ No _____
2. On this Depression Scale, have you rated yourself at 2 or greater on at least 5 symptoms 1-9?
Yes _____ No _____
3. Have your symptoms caused significant distress or limitations in your employment or social functioning?
Yes _____ No _____
4. Are you free from a grieving process (loss of a loved one) that has lasted greater than two months and might be causing your depressive symptoms?
Yes _____ No _____
5. Are you free from drug abuse and/or health problems that might be causing your depressive symptoms?
Yes _____ No _____

If you answered yes to all of these questions you may be suffering from Depression (DSM-IV-TR-APA). Your physician or other mental health professional will review your answers, take a medical history and do a mental status examination in order to determine your diagnosis. If you have Depression there are a number of treatments including medications and psychotherapy which can help improve your symptoms.

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