**△** 

## Columbia Depression Scale (Ages 11 and over) Present State (last 4 weeks) TO BE COMPLETED BY TEEN

If the answer to the question is "No," circle the 0; if it is "Yes," circle the 1. Please answer the following questions as honestly as possible.

| In the last four weeks  | No | Yes |
|---|----|-----|
| 1. Have you often felt sad or depressed?  | 0  | 1   |
| 2. Have you felt like nothing is fun for you and you just aren't interested in anything?                            | 0  | 1   |
| 3. Have you often felt grouchy or irritable and often in a bad mood, when even little things would make you mad?    | 0  | 1   |
| 4. Have you lost weight, more than just a few pounds?   | 0  | 1   |
| 5. Have you lost your appetite or often felt less like eating?  | 0  | 1   |
| 6. Have you gained a lot of weight, more than just a few pounds?  | 0  | 1   |
| 7. Have you felt much hungrier than usual or eaten a lot more than usual?   | 0  | 1   |
| 8. Have you had trouble sleeping – that is, trouble falling asleep, staying asleep, or waking up too early?         | 0  | 1   |
| 9. Have you slept more during the day than you usually do?  | 0  | 1   |
| 10. Have you often felt slowed down like you walked or talked much slower<br>than you usually do?                   | 0  | 1   |
| 11. Have you often felt restless like you just had to keep walking around?  | 0  | 1   |
| 12. Have you had less energy than you usually do?   | 0  | 1   |
| 13. Has doing even little things made you feel really tired?  | 0  | 1   |
| 14. Have you often blamed yourself for bad things that happened?  | 0  | 1   |
| 15. Have you felt you couldn't do anything well or that you weren't as<br>good looking or as smart as other people? | 0  | 1   |
| 16. Has it seemed like you couldn't think as clearly or as fast as usual?   | 0  | 1   |
| 17. Have you often had trouble keeping your mind on your [schoolwork/work] or other things?                         | 0  | 1   |
| 18. Has it often been hard for you to make up your mind or to make decisions?                                       | 0  | 1   |
| 19. Have you often thought about death or about people who had died or about being dead yourself?                   | 0  | 1   |
| 20. Have you thought seriously about killing yourself?  | 0  | 1   |
| 21. Have you EVER, in your WHOLE LIFE, tried to kill yourself or made a suicide attempt?                            | 0  | 1   |
| 22. Have you tried to kill yourself in the last four weeks?   | 0  | 1   |
|   |    |     |

Copyright 2004, DISC Development Group of Columbia University. Do not reproduce without permission.

For additional free copies of this instrument, contact: Columbia DISC Development Group, 1051 Riverside Drive, New York, NY, 10032.