

Patient Name: _____ Date: _____ Time: _____

On this questionnaire are groups of statements. Please read each group of statements carefully. Then, pick out one statement in each group which best describes the way you have been feeling the PAST WEEK, INCLUDING TODAY. Circle the number beside the statement that you picked. If several statements in the group seem equally correct, circle each one. Be sure to read all the statements in each group before making your choice

1. 0 I do not feel sad.
 1 I feel sad.
 2 I feel sad all the time and can't snap out of it.
 3 I am sad all the time and can't stand it.

2. 0 I am not particularly discouraged about the future.
 1 I feel discouraged about the future.
 2 I feel that I have nothing to look forward to.
 3 I feel that the future is hopeless and that I have nothing to look forward to.

3. 0 I do not feel like a failure
 1 I feel like I have failed more than the average person.
 2 As I look back on my life, all I can see is a lot of failure.
 3 I like a complete failure as a person.

4. 0 I get as much satisfaction out of things that I used to.
 1 I don't enjoy things the way I used to.
 2 I don't get real satisfaction out of anything any more.
 3 I am bored or dissatisfied with everything.

5. 0 I don't feel particularly guilty.
 1 I feel guilty a good part of the time.
 2 I feel quite guilty most of the time.
 2 I feel quite guilty all of the time.

6. 0 I don't feel that I am being punished.
 1 I feel that I may be punished.
 2 I expect to be punished.
 3 I feel that I am being punished.

7. 0 I don't feel disappointed in myself.
 1 I am disappointed in myself.
 2 I am disgusted in myself.
 3 I hate myself.

8. 0 I don't feel I am worse than anybody else.
 1 I am critical of myself for weaknesses or mistakes.
 2 I blame myself all the time for my faults
 3 I blame myself for everything bad that happens.

9. 0 I don't have any thoughts of killing myself.
 1 I have thoughts of killing myself, but wouldn't carry them out.
 2 I would like to kill myself.
 3 I would kill myself if I had the chance.

10. 0 I don't cry any more than I used to.
 1 I cry more than I used to.
 2 I cry all the time now.
 3 I used to be able to cry but now I can't.

11. 0 I am no more irritated now than I ever am.
 1 I get annoyed or irritated more easily than I used to.
 2 I feel irritated all the time now.
 3 I don't get irritated at all by the things that use to irritate me.
12. 0 I have lost interest in other people.
 1 I have less interest in other people than I used to have.
 2 I have lost most of my interest in other people.
 3 I have lost all my interest in other people
13. 0 I make decisions about as well as before.
 1 I put off making decisions more than I used to.
 2 I have greater difficulty making decisions than before.
 3 I can't make decisions at all anymore.
14. 0 I don't feel that I look any worse than I used to.
 1 I am worried that I am looking old or unattractive.
 2 I feel that there are permanent changes in my appearance that make me look unattractive
 3 I believe that I look ugly.
15. 0 I can work about as well as before.
 1 It takes an extra effort to get started at doing something.
 2 I have to push myself very hard to do anything.
 3 I can't do any work at all.
16. 0 I can sleep as well as usual.
 1 I don't sleep as well as I used to.
 2 I wake up 1-2 hours earlier than usual and find it very hard to get back to sleep.
 3 I wake up several hours earlier than I used to and cannot go back to sleep.
17. 0 I don't get more tired than usual.
 1 I get tired more easily that I used to.
 2 I get tired from most anything.
 3 I am too tired to do anything.
18. 0 My appetite is no worse than usual.
 1 My appetite is not as good as it used to be..
 2 My appetite is much worse now.
 3 I have no appetite at all
19. 0 I haven't lost much weight, if any.
 1 I have lost more than 5 pounds. I am purposely trying to lose weight
 2 I have lost more than 10 pounds. By eating less Yes ___ No ___
 3 I have lost more than 15 pounds.
20. 0 I am no more worried about my health than usual.
 1 I am worried about physical problems such as
 aches and pains; or upset stomach; constipation
 2 I am very worried about physical problems and it's hard to think of much else.
 3 I am so worried about physical problems that I cannot think of anything else.
21. 1. I have not noticed any recent changes in my interest in sex.
 2 I am less interested in sex than I used to be.
 3 I am much less interested in sex now.
 4 I have lost interest in sex completely.

Totals from pages 1 & 2. _____

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Beck Depression Inventory