

Name _____

Date _____

Hamilton Depression Rating Scale (HAMD)

Q1 How depressed are you?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q2 Do you feel guilty about things that you have done or thought?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q3 Is it taking longer to get off to sleep?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always

Q4 Do you sleep fitfully-often awakening?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always

Q5 Do you awaken earlier than usual and then find yourself unable to get back to sleep?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always

Q6 Have you lost interest in your work or hobbies?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q7 Is life pointless?

- = Score 0 if no
- = Score 1 if yes

Q8 Have you thought of ending it all?

- = Score 0 if no
- = Score 1 if yes

Q9 Have you made plans to kill yourself?

- = Score 0 if no
- = Score 1 if yes

Q10 Have you attempted to – or do you intend to kill yourself?

- = Score 0 if no
- = Score 1 if yes

Q11 Do you feel that you are slower than your normal or usual speed?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q12 Do you feel anxious or tense?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q13 Do you suffer from any physical symptoms?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always

Q14 Are you worried that you might have a serious illness such as cancer or VD?

- = Score 0 not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q15 Have you lost interest in sex?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always

Q16 Have you lost weight recently – excluding that due to dieting?

- = Score 0 if not at all
- = Score 1 if a little
- = Score 2 if moderately so
- = Score 3 if a lot
- = Score 4 if extremely so

Q17 Are you at your worst early in the day – but improve as the day goes on?

- = Score 0 if no
- = Score 1 if sometimes
- = Score 2 if always