

**Do you routinely screen your patients for depression?  
If so, which ones (e.g. adults, children, postpartum women), how do  
you do it (e.g. with which screening tool) and how often do you  
screen (e.g. at every visit, annually)?**

1. I routinely (annually) screen for depression. This is on all adults and teens. I use the PHQ-9.
2. No I do not routinely screen for depression.
3. I do not routinely screen for depression formally, but I usually ask about their "moods" or "stress".
4. I routinely screen my patients at least annually and as needed and in all of the categories you are suggesting. At least that is my intention and since I know all of my patients well the issue rapidly rises to the surface if there is an issue and I'm certainly not afraid to ask.
5. In adults over age 18 I use the PHQ-2 basic with "uptick" to PHQ-9, if positive for screening. Usually try to get 100%. We were in high 90's with this approach. We started to do it every visit. Reason was that we had to do this to catch the incident rate of depression in the population. Despite a small number who object, surveys suggest that depressed patients who eventually get treatment say they like this approach. Press Ganey is doing well on the CAHPS questions. In adolescents, annually try to do a CES-DC. Link:  
[http://www.brightfutures.org/mentalhealth/pdf/professionals/bridges/ces\\_dc.pdf](http://www.brightfutures.org/mentalhealth/pdf/professionals/bridges/ces_dc.pdf) These kids also get an annual drug screen starting at age 10 but we have found that its better to just try to ask the child alone most times. For Postpartum women we are still using the PHQ-2 and PHQ-9 but realize there are better tools. Our OB clinicians use a different tool. It is each visit.
6. No.