

Geriatric Depression Scale: Short Form

Yesavage, JA, et al. *J of Psychiatric Research*, 17, 37-49

YES = 1
NO = 0

Choose the best answer for how you have felt over the past week

- 1. Are you basically satisfied with your life? _____
- 2. Have you dropped many of your activities and interests? _____
- 3. Do you feel that your life is empty? _____
- 4. Do you often get bored? _____
- 5. Are you in good spirits most of the time? _____
- 6. Are you afraid that something bad is going to happen to you? _____
- 7. Do you feel happy most of the time? _____
- 8. Do you often feel helpless? _____
- 9. Do you prefer to stay at home, rather than going out and doing new things? _____
- 10. Do you feel you have more problems with memory than most? _____
- 11. Do you think it is wonderful to be alive now? _____
- 12. Do you feel pretty worthless the way you are now? _____
- 13. Do you feel full of energy? _____
- 14. Do you feel that your situation is hopeless? _____
- 15. Do you think that most people are better off than you are? _____

TOTAL **0**

>5 Suggestive of depression
> 10 Indicative of depression