### PHQ-9

**Bengali Translation:**

<table>
<thead>
<tr>
<th>Item</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Total Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Sadness, loss of interest</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>Fatigue, sleep problems</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td>Appetite change</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>4.</td>
<td>Trouble concentrating</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>5.</td>
<td>Anxiety, indecision</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>6.</td>
<td>Thoughts of death</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>7.</td>
<td>Self-harm thoughts</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>8.</td>
<td>Suicide attempts</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

**Total Score:**

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**For office coding:**

\[
\text{Total Score: } \sum_{i=1}^{8} x_i
\]

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**Instructions:**

- Item 0: This item is not applicable.
- Item 1: Felt depressed all day.
- Item 2: Felt fatigued or had little energy.
- Item 3: Had trouble eating.
- Item 4: Trouble concentrating.
- Item 5: Tired.
- Item 6: Thoughts of death.
- Item 7: Self-harm thoughts.
- Item 8: Suicide attempts.

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**Additional Information:**

- This questionnaire can be used to screen for depression.
- A score of 0-4 indicates minimal depression.
- A score of 5-9 indicates mild depression.
- A score of 10-14 indicates moderate depression.
- A score of 15 or above indicates severe depression.

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