The following guideline recommends screening for depression, assessing suicide risk, following diagnostic criteria, shared decision-making and treatment planning, monitoring and adjusting treatment.

<table>
<thead>
<tr>
<th>Eligible Population</th>
<th>Recommendation and Level of Evidence</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults 18 years or older, including pregnant and postpartum women</td>
<td>Detection and Diagnosis: Screen for depression with adequate systems in place to ensure accurate diagnosis, effective treatment and appropriate follow-up [A]. Use a validated screening tool (e.g., PHQ-2, PHQ-9) [A]. Assess if criteria are met using DSM-5 criteria [A]. Criteria A, B, C and D must be met.</td>
<td>Annually</td>
</tr>
</tbody>
</table>

**DSM-5 criteria**

**Major Depression**

1. Depressed mood [x]
2. Marked diminished interest/pleasure [x]
3. Significant weight gain/loss, appetite decrease/increase [x]
4. Insomnia/hypersomnia [x]
5. Psychomotor agitation/retardation noticeable by others [x]
6. Fatigue/loss of energy [x]
7. Feelings of worthlessness or inappropriate guilt [x]
8. Diminished concentration or indecisiveness [x]
9. Recurrent thoughts of death or suicidal ideation [x]
10. Hopelessness [x]

**Persistent Depressive Disorder**

3 total for ≥ 2 years. Must include symptom #1. Never > 2 months symptom-free

| Levels of Evidence for the most significant recommendations: A = randomized controlled trials; B = controlled trials, no randomization; C = observational studies; D = opinion of expert panel |

This guideline is based on several sources, including: American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders Fifth Edition - DSM-5; Nonpharmacological Versus Pharmacological Treatments for Adult Patients with Major Depressive Disorder, AHRQ Publication No. 15(16)-EHC031-EF, AHRQ, December 2015; Suicide Prevention Toolkit for Primary Care: Suicide Assessment Five-Step Evaluation and Triage - SAFETY. Individual patient considerations and advances in medical science may supersede or modify these recommendations.


Approved and Adopted by January 2016

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