

ADOLESCENT DEPRESSION



CHECKLIST

DATE _____

№	ACTIVITIES	<input checked="" type="checkbox"/>
ATTITUDES TO CONSIDER REGARDING PERSONALITY		
1	Excessive mood swings	
2	Loss of interest in activities that were enjoyable before	
3	Significant weight loss or loss of appetite	
4	Excessive changes in sleep routines (sleeping a lot + 9 hours a day or sleeping too little - 4 hours a day)	
5	Changes in physical activity (Being excessively active or excessively still)	
6	Constant fatigue or loss of energy	
7	Negative self-concept (Constant expressions of guilt, inadequacy, or undeservingness)	
8	Difficulty thinking clearly (excessive rumination of thoughts, difficulty concentrating, excessive indecision)	
9	Suicidal comments (Comments about the meaning of your life, doubts about death, or comments about ending one's own life)	

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ATTITUDES TO CONSIDER REGARDING BEHAVIOUR		
1	Excessive use of drugs or alcohol	
2	Difficulties in studies (behavioral problems, warning calls, lower grades)	
3	Frequent physical pain or cramps	
4	Changes in the social circle. Different friends or acquaintances	
5	Escape from home, school or university	
6	Unconscious behaviors (excesses, theft, actions that put your integrity or even your life at risk)	
7	Loss of hygiene and lack of concern for physical appearance	
8	Aggressive and irritable behavior	



**IMPORTANT TO KEEP IN MIND FOR THE ADMINISTRATION OF
THIS QUESTIONNAIRE**

TO SPEAK OF THE ONSET OF ADOLESCENT DEPRESSION, AT
LEAST 10 OF THESE CRITERIA MUST BE PRESENT ON A BASIS OF
3 TO 5 DAYS PER WEEK.

ADMINISTER THIS TOOL FROM DAILY OBSERVATION FOR AT
LEAST 2 WEEKS. PREVENT THE OBSERVED PERSON,
ADOLESCENT OR PRE-ADOLESCENT, FROM FINDING OUT
ABOUT THIS QUESTIONNAIRE.

DELIVER THE RESULTS TO YOUR TRUSTED PSYCHOLOGIST OR
PSYCHIATRIST TO GUARANTEE THE RESULTS AND LEARN
ABOUT HOW TO PROCEED.

TAKE NOTE OF ANY EVENT THAT YOU CONSIDER OF INTEREST
TO THE PROFESSIONAL

**THIS QUESTIONNAIRE CAN BE ADMINISTERED TO
ADOLESCENTS FROM 12 TO 18 YEARS OLD.**