

# Internal Medicine Associates BLUES TEST



ARE YOU FEELING DOWN LATELY?

COMPLETE THE SURVEY BELOW AND TALK TO YOUR DOCTOR ABOUT  
THE BLUES TEST.

Do you have any long-term illnesses?

Yes            Uncertain            No            No answer

Do take any medications regularly?

Yes            Uncertain            No            No answer

Have you felt tired lately?

Yes            Uncertain            No            No answer

Have you gained or lost any recent recently?

Yes            Uncertain            No            No answer

Have you had any changes in your relationships?

Yes            Uncertain            No            No answer

The Blues Test is an accurate and reliable way to diagnose depression.  
It is based on a 30+ year old widely accepted psychological evaluation  
instrument (CES-D)

**IF YOU ANSWERED YES TO ANY OF THESE QUESTIONS, TALK TO YOUR DOCTOR  
ABOUT THE BLUES TEST.**

# Internal Medicine Associates

## Blues Questionnaire



"THE CARE YOU CAN TRUST"

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

| During the past week:  | Rarely or none<br>of the time<br>(0-1 day) | Some or a<br>little of the<br>time<br>(1-2 days) | Occasionally<br>or a moderate<br>amount of time<br>(3-4 days) | Most or all of<br>the time<br>(5-7 days) |
|--|--|--|---|--|
| 1. You were bothered by things that usually don't bother you.                                  |  |  |   |  |
| 2. You did not feel like eating; your appetite was poor.                                       |  |  |   |  |
| 3. You felt that you could not shake off the blues even with help from your family or friends. |  |  |   |  |
| 4. You felt that you were just as good as other people.  |  |  |   |  |
| 5. You had trouble keeping your mind on what you were doing.                                   |  |  |   |  |
| 6. You felt depressed.   |  |  |   |  |
| 7. You felt that everything you did was an effort.   |  |  |   |  |
| 8. You felt hopeful about the future.  |  |  |   |  |
| 9. You thought your life had been a failure.   |  |  |   |  |
| 10. You felt fearful.  |  |  |   |  |
| 11. Your sleep was restless.   |  |  |   |  |
| 12. You were happy.  |  |  |   |  |
| 13. You talked less than usual.  |  |  |   |  |
| 14. You felt lonely.   |  |  |   |  |
| 15. People were unfriendly.  |  |  |   |  |
| 16. You enjoyed life.  |  |  |   |  |
| 17. You had crying spells.   |  |  |   |  |
| 18. You felt sad.  |  |  |   |  |
| 19. You felt that people disliked you.   |  |  |   |  |
| 20. You could not get "going."   |  |  |   |  |