

McLaren Print System Order

Order No: 52450 Reprint Previous Order No: 40561
Order Date: 2020-02-07
User: Angela DeLaRosa
Phone: 9893932714

Ship Location: McLaren Bay Family Medicine Attn Angela DeLaRosa
3720 Katalin Ct, Suite 201
Bay City, MI 48706

Forms

Quantity: 1000
Paragon Dept No: 69000
Dept Name: McLaren Medical Group
Company Number: 810

Order Total Price: 0.00

Item Number: MM-3882
Item Description: Patient Health Questionnaire (PHQ-‐2)
Revision Date: 9/2018
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Misc Info: ss; black; bond



Patient Health Questionnaire (PHQ-2)

Patient Name (First, Last) _____ Date of Birth _____

Please answer the following questions.

Over the past 2 weeks, have you been bothered by any of the following problems?	Yes	No
1. Little interest or pleasure in doing things		
2. Feeling down, depressed or hopeless		

The PHQ questionnaire was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer, Inc.

Reviewed by:
Provider's Signature (Required) _____ Date & Time (Required) _____