

Postpartum Depression Assessment Form

Name

Date of Birth

Assessment Date

Weeks Postpartum

Assessment Questions

1. I have been able to laugh and see the funny side of things:

☐ ☐ ☐ ☐

2. I have looked forward with enjoyment to things:

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3. I have blamed myself unnecessarily when things went wrong:

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4. I have been anxious or worried for no good reason:

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5. I have felt scared or panicky for no good reason:

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6. Things have been getting on top of me:

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7. I have been so unhappy that I have had difficulty sleeping:

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8. I have felt sad or miserable:

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9. I have been so unhappy that I have been crying:

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10. The thought of harming myself has occurred to me:

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Additional Comments