Pediatric Depressive Symptoms

Please respond to each question or statement by marking one box per row.

	In the past 7 days...	**Never**	**Almost Never**	**Sometimes**	**Often**	**Almost Always**
2227R1r	I didn't care about anything	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
228R1r	I felt sad	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2697R1r	I wanted to be by myself	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
3952aR2r	It was hard for me to have fun.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
461R1r	I felt alone.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
488R1r	I could not stop feeling sad	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
5035R1r	I felt like I couldn't do anything right.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
5041R1r	I felt everything in my life went wrong.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
5047R1r	I felt stressed.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
679aR2r	Being sad made it hard for me to do things with my friends.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
7010	I felt sad for no reason.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

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	In the past 7 days...	**Never**	**Almost Never**	**Sometimes**	**Often**	**Almost Always**
711R1r	I felt lonely	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
712R1r	I felt unhappy.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
9001r	I felt too sad to eat	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

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