

## Standard Work Instructions: TELEPHONE VISIT- PHQ2/9 Pre-visit Screening

April 8, 2020

<b>Keep the Time Structured</b> - Patients may go off topic or elaborate on questions during screening. They can be gently redirected back to the question by saying, <i>"We can circle back to talking about this at the end of the questions, I am interested in hearing more, the next question is..."</i> Then, if extra time follow up by asking questions to advance the therapeutic relationship.			
Step	Skill	Task Description	Tools/Materials Needed
1	CMA, RN/LPN	Use two patient identifiers to confirm you are in the correct patient's chart. (Patient's full name and date of birth)	Maestro- patient's chart
2	CMA, RN/LPN	Complete screening during pre-visit work immediately before the scheduled provider visit.	Maestro- Patient screening tab
3	CMA, RN/LPN	Introduce and obtain permission to ask PHQ-9 Health Questionnaire questions: <ul style="list-style-type: none"> <li>- <i>"You may already know. Do you know, about the PHQ -9 Health Questionnaire, the 9 questions that assess your mood and other symptoms that could be related to your mood?"</i></li> <li>- <b>Patient answer: "Yes"</b> = <i>"Okay, I'd like to ask the first two of these questions so that your provider (name the provider) will better know how to treat you during your visit today. Would that be okay?"</i></li> <li>- <b>Patient answer: "No"</b> = <i>"It is a set of 9 questions that give us a better understanding of your mood and symptoms that may be related to mood. The questions helps us know how you have been doing over the past two weeks. We usually just start with two questions. May I ask you the first two questions that look back over the past two weeks?"</i></li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
4	CMA, RN/LPN	Explain answer choices: <ul style="list-style-type: none"> <li>- <i>"Think back over the last two weeks to answer. There are no right or wrong answers, just answer as best you can recall. Your answer choices are: Not at all, several days, more than half the days or nearly every day."</i></li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
5	CMA, RN/LPN	Be mindful of patient's interpretation of questions and ask them to clarify as needed. <ul style="list-style-type: none"> <li>• Example) <i>"Over the last 2 weeks, have you experienced little pleasure or interest in doing things? Your choices are: Not at all, several days, more than half the days or every day."</i></li> <li>• <b>Tip:</b> Patients will answer <i>"not at all"</i> when they really meant they have <u>not had any interest</u> or pleasure in doing things. Therefore, if they answer <i>"not at all"</i> clarify by asking: <i>"So you have been interested in, and enjoyed doing things you typically enjoy doing?"</i> This will help you know they understood the question.</li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire

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6	CMA, RN/LPN	Ask Flow Sheet questions as they are written: <ul style="list-style-type: none"> <li>- <i>It is important to ask the questions verbatim. If the patient asks questions, provide clarification on the questionnaire's question and avoid interpretation. Then repeat the question verbatim.</i></li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
7	CMA, RN/LPN	Patient's responses of 3 or greater on PHQ-2 will automatically prompt you to complete the PHQ-9 questions. Ask additional PHQ-9 questions as they are written:	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
8	CMA, RN/LPN	Enter notes in the flowsheet as needed to provide clarity or additional information regarding patient's response. Examples) <ul style="list-style-type: none"> <li>- <i>Sleep note: "falling" or "staying" or "too much"</i> Sometimes patients will say all three.</li> <li>- <i>Appetite note: "over" or "poor"</i></li> <li>- <i>Physical movement: "slow" or "fidgety or restless and moving around more than usual"</i></li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
9	CMA, RN/LPN	Identifying suicide risk: "Thoughts that you would be better off dead, or of hurting yourself in some way?" <ul style="list-style-type: none"> <li>- <i>If the patient answers anything other than "not at all", meaning they score 1, 2, or 3 on this question, <b>then stay on the line with patient and immediately notify the provider. Stay on the line until the provider is also on the line.</b></i></li> </ul>	Maestro- Patient screening tab- Depression Screening PHQ2/PHQ9 Questionnaire
10	Provider	Assumes care of patient via telephone. Asks Patient PHQ-9 Follow-up questions for patient's scoring 1-3 on suicide risk question. Patient answers "yes" or "no".	Maestro- Progress Note
11	Provider	Record patient's answers in the progress note. Follow-up Questions: <ol style="list-style-type: none"> <li>1. Do you feel like life is not worth living?</li> <li>2. Do you have thoughts of harming yourself?</li> <li>3. Do you have plans for how you would harm yourself?</li> <li>4. Do you plan to act on this soon?</li> <li>5. Do you have the means to harm yourself?</li> </ol>	Maestro- Progress Note