The Australian Government Department of Health now requires Obstetricians to offer all of their patients Mental Health Assessments at ~ 28 weeks during pregnancy and again at the routine 6 week Postnatal Visit. This assessment will be done by giving each woman the option to complete the Questionnaire below. The aim of this process is to improve the health of women and their families. (Dr Stephen O'Callaghan, 1st November 2017).

Completing this Questionnaire is OPTIONAL – you may choose to do this or you may choose NOT to do this.

Please choose either:	I DO wish to complete this Questionnaire:	
	I do NOT wish to complete this Questionnaire:	

NB. Any response indicating an increased risk of Perinatal Depression will oblige Dr O'Callaghan to refer you to your GP and/or a Psychiatrist/Psychologist for care.

Adapted from the Edinburgh Postnatal Depression Scale (Cox JL, Holden JM, Sagovsky R), and the RANZCOG.

DURING THE LAST WEEK:

- 1. I have been able to laugh and see the funny side of things:
 - 0 As much as I always could
 - 1 Not quite as much now
 - 2 Definitely not so much now
 - 3 Not at all
- 2. I have looked forward with enjoyment to things:
 - 0 As much as I ever did 1 Rather less than I used to 2 Definitely less than I used to 3 Hardly at all
- 3. I have blamed myself unnecessarily when things go wrong:
 - 3 Yes, most of the time
 - 2 Yes, some of the time
 - 1 Not very often
 - 0 No, never
- 4. I have been anxious or worried for no good reason:
 - 0 No, not at all 1 Hardly ever 2 Yes, sometimes
 - 3 Yes, very often
- 5. I have felt scared or panicky for no very good reason:
 - 3 Yes, quite a lot 2 Yes, sometimes 1 No, not much 0 No, not at all

6. Things have been getting on top of me:

- 3 Yes, most of the time I haven't been able to cope at all
- 2 Yes, sometimes I haven't been coping as well as usual
- 1 No, most of the time I have coped quite well
- 0 No, I have been coping as well as ever
- 7. I have been so unhappy that I have had difficulty sleeping:
 - 3 Yes, most of the time
 - 2 Yes, sometimes
 - 1 Not very often
 - 0 No, not at all

8. I have felt sad or miserable:

- 3 Yes, most of the time
- 2 Yes, quite often
- 1 Not very often
- 0 No, not at all
- 9. I have been so unhappy that I have been crying:
 - 3 Yes, most of the time 2 Yes, quite often 1 Only occasionally 0 No, never
- 10. The thought of harming myself has occurred to me:
 - 3 Yes, quite often 2 Sometimes 1 Hardy ever 0 Never

(TOTAL SCORE =).

i. During the last year has your Doctor treated you with any medications for mental health conditions (such as Anxiety, Depression and so on)?

NO or YES:

ii. During your pregnancy, have you been drinking any alcohol? – if yes, what type (wine, spirits and so on) and how much each week?

NO or YES:

iii. During your pregnancy, have you been using illicit drugs? – if yes, what type (as tablets, by smoking or injecting drugs and so on) and how much each week?

NO or YES:

- iv. Has anyone in your family/household ever put you down, humiliated you or tried to control what you can or can't do? Has anyone ever hurt or threatened to hurt you or your children? Do you feel that you need help with Domestic Violence now?
 - NO or YES:
 - (NB. If you answer "YES" to this last Question, Dr O'Callaghan will be obliged by law to report this to the local Police for follow-up and investigation).