Depressive Symptoms?  
Unexplained Somatic Complaints?

Safety screen:  
Neglect/Abuse?  
Medical condition (i.e. anemia, thyroid problem?)  
Thoughts of hurting oneself?  
if yes, are there plans and means available?

Think about comorbidity:  
Anxiety, ODD, Conduct Disorder, ADHD, Dysthymia, Substance Abuse

Diagnosis:  
DSM-5 Diagnostic Criteria  
Rating Scale: SMFQ or PHQ-9 (others available for a fee)  
Label as “Unspecified Depressive Disorder” if significant symptoms but not clear if Major Depression

Can problem be managed in primary care?  
YES  
Moderate/Severe Problem  
(significant impairment in one setting, or moderate impairment in multiple settings)  
NO  
Mild Problem  
(noticeable, but basically functioning OK)

Judgment Call

Recommend individual psychotherapy  
CBT and IPT are preferred, where available.  
Psychoeducation, coping skills, and problem solving focus are all helpful therapy strategies.  
Educate patient and family (as per mild problem list on left).  
Consider family therapy referral.  
Consider starting SSRI, especially if severe.  
Fluoxetine is the first line choice.  
Escitalopram/Levomilnepine second line.  
Third line agents are other SSRIs, buproprion, mirtazepine.  
Wait four weeks between dose increases to see changes.  
Check for side effects every 1-2 weeks in first month of use to ensure no new irritability or suicidality (phone or in person).  
Stop SSRI if get agitation, anxiety or suicidal thoughts.  
Consult MH specialist if monotherapy is not helping.  
Monitor progress with repeat use of rating scale.

Follow up appointment in 2-4 weeks to check if situation is getting worse.  
Repeating rating scales helps comparisons.  
Those not improving on their own are referral candidates for counseling.

Educate patient and family  
Support increased peer interactions.  
Behavior activation, exercise.  
Encourage good sleep hygiene.  
Reduce stressors, if possible.  
Remove any guns from home.  
Offer parent/child further reading resources.

Primary References:  
Zuckerbrot R ed.: “Guidelines for Adolescent Depression in Primary Care (GLAD-PC) Toolkit.” Columbia University: Center for the Advancement of Children’s Mental Health