Stroke Aphasic Depression Questionnaire Hospital Version (SADQ-H 10)

Please indicate how many days of the last 7 the participant has shown the following behaviours:

1. Did he/she have weeping spells?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

2. Did he/she have restless disturbed nights?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

3. Did he/she avoid eye contact when you spoke to him/her?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

4. Did he/she burst into tears?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

5. Did he/she indicate suffering from aches and pains?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

6. Did he/she get angry?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

7. Did he/she refuse to participate in social activities?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

8. Did he/she sit without doing anything?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

9. Did he/she keep him/herself occupied during the day?
   - Every day this week
   - On 4-6 days this week
   - On 1-4 days this week
   - Not at all this week

10. Did he/she get restless and fidgety?
    - Every day this week
    - On 4-6 days this week
    - On 1-4 days this week
    - Not at all this week