

# Depression Treatment Guidelines

## General Information

|                              |
|------------------------------|
| Date of Issue:               |
| Issuing Authority/Physician: |
| Review Date:                 |

## Diagnostic Criteria

- **DSM-5 Criteria Summary**

- Depressed mood most of the day, nearly every day.
- Markedly diminished interest or pleasure in all, or almost all, activities.
- Significant weight loss when not dieting, weight gain, or decrease or increase in appetite.
- Insomnia or hypersomnia nearly every day.
- Psychomotor agitation or retardation.
- Fatigue or loss of energy.
- Feelings of worthlessness or excessive or inappropriate guilt.
- Diminished ability to think or concentrate, or indecisiveness.
- Recurrent thoughts of death, recurrent suicidal ideation without a specific plan, or a suicide attempt.

- **ICD-10 Codes:** F32.0 (Mild), F32.1 (Moderate), F32.2 (Severe Without Psychotic Features), F32.3 (Severe With Psychotic Features), F33.x (Major Depressive Disorder, Recurrent)

## Diagnostic Methods and Tests

- **Initial Clinical Interview:** Gather comprehensive psychiatric history, symptomatology, and functional impairment.
- **Standardized Screening Tools:** PHQ-9, Hamilton Depression Rating Scale, Beck Depression Inventory.
- **Physical Examination:** To rule out physical causes contributing to depressive symptoms.
- **Laboratory Tests:** Thyroid function tests, complete blood count (CBC), vitamin D levels, etc.
- **Additional Diagnostic Considerations:** Substance use assessment, bipolar disorder screening.

## Treatment Guidelines

### 1. Psychotherapy

- Cognitive Behavioral Therapy (CBT)
- Interpersonal Therapy (IPT)
- Problem-Solving Therapy

### 2. Pharmacotherapy

- SSRIs (e.g., Sertraline, Fluoxetine)
- SNRIs (e.g., Venlafaxine, Duloxetine)
- Atypical Antidepressants (e.g., Bupropion, Mirtazapine)
- Tricyclic Antidepressants (TCAs) and Monoamine Oxidase Inhibitors (MAOIs) for treatment-resistant cases

### 3. Adjunctive Treatments

- Lifestyle modifications (exercise, diet)
- Electroconvulsive Therapy (ECT) for severe depression resistant to medication
- Transcranial Magnetic Stimulation (TMS)

## CPT Codes for Billing

- Psychotherapy: 90832 (30 min), 90834 (45 min), 90837 (60 min)
- Pharmacologic Management: 99213-99215 (Outpatient visit for medication management)
- ECT: 90870

## Monitoring and Follow-Up

- **Initial Response Check:** 2-4 weeks after starting treatment.
- **Regular Follow-Up:** Every 4-6 weeks to adjust treatment as necessary.
- **Long-Term Management:** Assess for maintenance therapy to prevent relapse.

## Referral Considerations

- **Specialist Referral:** For patients with psychotic features, suicidal ideation, or complex comorbid psychiatric conditions.
- **Multidisciplinary Team:** Consideration for cases requiring coordinated care between mental health specialists, primary care physicians, and other healthcare professionals.

## Additional Comments