Adolescent Depression Clinical Practice Guideline* Summary – February 2012

Assessment: All adolescents receiving mental health services should be assessed for depression.

If assessed positive for depression, also assess for:
- Psychosis, seasonal depression and bipolar dx
- Risk for suicide/self harm
- Risk to harm others
- Ongoing or past exposure to negative events
- Psychiatric or medical co-morbidity

Acute phase tx (2—8 weeks): Treatment Choice
- Anti-depressant medication
- Psychotherapy
- Medication and Psychotherapy
- Education, support, and case management

Monitor patient’s progress frequently

2 or more family visits within 84 days of diagnosis

Continuation Phase of tx (6—12 months) Patients should be seen at least monthly

Moderate Improvement?

Yes

No

Assess factors contributing to poor performance

Maintenance Phase: Decrease frequency of visit if applicable

See recommendation 14 for scales to evaluate

*Adapted from the American Academy of Child and Adolescent Psychiatry (AACAP) Practice Parameter for the Assessment and Treatment of Children and Adolescents with Depressive Disorders (2007)