

BDI-II Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · August 2026 · Reproduces no instrument items, forms, or scoring materials

The BDI-II is a 21-item licensed depression severity measure (0 to 63; Pearson, Level B). The manual's bands describe reported symptom burden, never a diagnosis, and no authority mandates a score for anything. Defensible charting names the edition and mode, handles the suicide item separately, states change honestly, and keeps the licensing trail clean.

Instrument identity, edition, mode editions do not transfer

Do: chart BDI-II + language, date, and mode (paper / on-screen / remote with conditions); hold the edition constant across a series.

Pitfall: BDI or BDI-IA history read against BDI-II bands; the 1996 revision changed items and runs a few points higher.

The result with the manual's descriptor band, not diagnosis

Do: "total 24, within the manual's moderate severity range (Beck, Steer, and Brown, 1996)."

Pitfall: "severe depressive disorder" from a total; optimal case-finding cutoffs ran 10 to 25 across studies.

The suicide item, separately arithmetic works in neither direction

Do: any endorsement gets a timely, separately documented risk assessment, whatever the total.

Pitfall: a mild total used to skip follow-up, or a severe total charted as imminent risk with no direct assessment.

Completion and conditions no proration rule exists

Do: chart incomplete administrations as incomplete, with extent, reason, and the plan to complete or substitute.

Pitfall: a partial sum read against the 0 to 63 bands; no public publisher rule authorizes proration.

Trajectory with method honesty no universal change number

Do: prior total, interval, absolute and percent change; name the method if you claim significance (published values: ~5, 8.46, 10, or 17.5% of baseline).

Pitfall: "reliable improvement" with no method, or one trial's recovery endpoint charted as a manual rule.

Integration and limits where false certainty lives

Do: tie the score to interview, function, and collateral; state somatic, language, norm-age, and response-style limits.

Pitfall: somatic inflation ignored (an MS cohort: 54.1% flagged vs 30.7% on the somatic-free form), or a high total charted as exaggeration.

The licensing trail purchase is not permission

Do: a purchased form or Q-global usage behind every administration; results in the chart, item content out of the EHR.

Pitfall: photocopies, survey-platform rebuilds, or the "unlimited" subscription read as covering remote administrations (it covers manual entry only).

Before the note is signed

- ☐ Edition, language, and mode named; series held constant
- ☐ Total carries the manual's band phrase with attribution
- ☐ Suicide item assessed separately when endorsed
- ☐ Incomplete administrations charted, never prorated
- ☐ Change stated raw and percent; method named or none claimed
- ☐ Score integrated with interview and function; limits stated
- ☐ Licensed form or usage behind every administration

Drafting with AI

Give it the facts: edition and mode, completion, total, suicide-item status, prior scores with dates, function, limits.

"Draft BDI-II documentation: English Q-global, complete, total 16 mild range, intake 32 with the suicide item assessed separately, 50% reduction, function returning, next administration in four weeks."

Never paste patient-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

0 to 63

bands at 14 / 20 / 29

21 items

two-week window

No BDI-III

norms date to 1996

Level B licensed

no photocopying

BDI-II Documentation Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements. Contains no instrument content.

Setting: _____ Patient (initials): _____ Date: _____ Clinician: _____

Instrument + edition + language: _____ Mode (paper / on-screen / remote + conditions): _____

Completion

Complete or incomplete: extent, reason, plan · never prorate a partial against the 0-63 bands

Result

Total ___/63 · manual severity range with attribution (Beck, Steer, and Brown, 1996)

Suicide item

Not endorsed / endorsed: separate risk assessment and where documented · never resolved by the total

Trajectory

Prior total and date · absolute and percent change · method named, or raw change only

Integration

Interview, function, collateral: consistent or discordant, and how investigated

Limits

Somatic confounds · language and norms · response style · nonstandard conditions

Action and licensing

Risk, formulation, treatment intensity, follow-up interval · purchased form or usage; qualified user

Clinician (name and credentials): _____ Signature: _____ Date: _____