

SELF-REPORT SUMMARY (SIGH-SAD-SA 2008)

Date ____ / ____ / ____

In the questions that follow, please circle the number of one alternative in each set that best describes how you have been during the past week, and enter the rating in the left-hand columns (Group A or Group B). If you have changed during the last few days, circle the alternative that best describes how you are today. Before you select an alternative in each set, read all of the choices to make sure you pick the most accurate one.

GROUP A RATINGS	GROUP B RATINGS	
Rating: <input style="width: 40px; height: 30px;" type="text"/>		<p>DURING THE PAST WEEK . . .</p> <p>QUESTION 1</p> <p>0 - I have <i>not</i> been feeling down or depressed at all.</p> <p>1 - I have been feeling somewhat down or depressed.</p> <p>2 - I have been feeling quite down or depressed.</p> <p>3 - I have been feeling and looking very depressed (or others have said so).</p> <p>4 - I haven't been able to think about anything except how bad or depressed I feel.</p>
Rating: <input style="width: 40px; height: 30px;" type="text"/>		<p>QUESTION 2</p> <p>0 - I have been keeping busy and have been interested in the things I've been doing.</p> <p>1 - I haven't been quite as interested in doing things as I used to be.</p> <p>2 - I have definitely not been as interested in things as I used to be, and I have had to push myself to do them.</p> <p>3 - I have not been doing much because I feel so bad.</p> <p>4 - I have stopped doing nearly everything — I just sit or sleep most of the day.</p>
	Rating: <input style="width: 40px; height: 30px;" type="text"/>	<p><i>Note: When an item refers to how you "normally" are, it means when you are feeling OK, or as close to OK as you get.</i></p> <p>QUESTION 3</p> <p>0 - I have been interested in socializing with others as much as normal.</p> <p>1 - I have still been interacting with others but am less interested in doing so.</p> <p>2 - I have been interacting less with other people in social situations.</p> <p>3 - I have been interacting less with others at home or at work.</p> <p>4 - I have become quite withdrawn at home or at work.</p>
Rating: <input style="width: 40px; height: 30px;" type="text"/>		<p>QUESTION 4</p> <p><i>(This question is about your interest in sex, not your actual sexual activity.)</i></p> <p>0 - My interest in sex has been about the same as it was before I became depressed, or greater than normal.</p> <p>1 - I have not been quite as interested in sex as I was before I became depressed.</p> <p>2 - I have been much less interested in sex than I was before I became depressed.</p>

The SIGH-SAD Self-Assessment version (SIGH-SAD-SA) is based on a self-rated depression inventory (*SIGH-SAD-SR*) developed by J.B.W. Williams, D.S.W., M.J. Link, B.S., and M. Terman, Ph.D. In turn, the SIGH-SAD-SR was based on the *Structured Interview Guide for the Hamilton Depression Rating Scale - Seasonal Affective Disorder Version (SIGH-SAD)*, by J.B.W. Williams, M.J. Link, N.E. Rosenthal, and M. Terman (1998), New York, New York State Psychiatric Institute. The work was supported in part by BRSF Grant 903-E759S from the Research Foundation for Mental Hygiene, Inc., and the U.S. National Institute of Mental Health Grant MH-42931. © 2008, Center for Environmental Therapeutics, Inc. All rights reserved. Permission is granted for personal use or use in clinical practice. Use and distribution by commercial parties is prohibited. The PDF is downloadable free of charge from www.cet.org. 1/08 version.

<p>Rating:</p> <input data-bbox="191 247 261 317" type="checkbox"/>		<p><i>Remember, "normal" means how you're feeling when you're OK.</i></p> <p>QUESTION 5</p> <p>0 - My appetite has been normal or greater than normal.</p> <p>1 - I have had less appetite than normal, but I eat without anyone having to urge me.</p> <p>2 - I have had so little appetite that I have not been eating regularly unless someone urges me to.</p>
<p>Rating:</p> <input data-bbox="191 527 261 596" type="checkbox"/>		<p>QUESTION 6</p> <p><i>(Circle "0" for this question if you have lost weight due to <u>dieting</u>, or have lost weight that you had <u>previously gained</u> when you were depressed.)</i></p> <p>0 - I don't think I have lost any weight since I became depressed, or if I have lost weight, I have started to gain it back.</p> <p>1 - I have probably lost some weight (that I haven't gained back at all) because I haven't felt like eating.</p> <p>2 - I have definitely lost weight (that I haven't gained back at all) because I haven't felt like eating.</p>
	<p>Rating:</p> <input data-bbox="391 831 461 900" type="checkbox"/>	<p>QUESTION 7</p> <p>0 - I have not gained weight above my normal level in the past week.</p> <p>1 - I have probably gained weight (two or more pounds) in the past week, and my current weight is above normal for me.</p> <p>2 - I have definitely gained weight (two or more pounds) in the past week, and my current weight is above normal for me.</p>
	<p>Rating:</p> <input data-bbox="391 1050 461 1119" type="checkbox"/>	<p>QUESTION 8</p> <p><i>(This question is about your appetite, not what you have actually been eating.)</i></p> <p>0 - My appetite has been normal or less than normal.</p> <p>1 - I have wanted to eat just a little more than normal.</p> <p>2 - I have wanted to eat somewhat more than normal.</p> <p>3 - I have wanted to eat much more than normal.</p>
	<p>Rating:</p> <input data-bbox="391 1266 461 1335" type="checkbox"/>	<p>QUESTION 9</p> <p><i>(This question is about what you have actually been eating.)</i></p> <p>0 - I have not been eating more than normal.</p> <p>1 - I have been eating a little more than normal.</p> <p>2 - I have been eating somewhat more than normal.</p> <p>3 - I have been eating much more than normal.</p>
	<p>Rating:</p> <input data-bbox="391 1482 461 1551" type="checkbox"/>	<p>QUESTION 10</p> <p>0 - I have not been craving or eating sweets or starches any more than when I feel normal.</p> <p>1 - I have been craving or eating sweets or starches somewhat more than when I feel normal.</p> <p>2 - I have been craving or eating sweets or starches much more than when I feel normal.</p> <p>3 - I have had an irresistible craving for sweets or starches.</p>
<p>Rating:</p> <input data-bbox="191 1759 261 1829" type="checkbox"/>		<p>QUESTION 11</p> <p>0 - I have not had any difficulty falling asleep at night.</p> <p>1 - Some nights it has taken me longer than half an hour to fall asleep.</p> <p>2 - I have had trouble falling asleep every night.</p>

<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 12</p> <p>0 - I have not been waking up in the middle of the night, or if I have gotten up to go to the bathroom, I have fallen right back asleep.</p> <p>1 - My sleep has been restless and disturbed during the night.</p> <p>2 - I have been waking during the night without being able to get right back to sleep, or I've been getting out of bed in the middle of the night (not just to go to the bathroom).</p>
<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 13</p> <p>0 - I have been oversleeping or waking up at a reasonable hour in the morning.</p> <p>1 - I have been waking up very early in the morning, but I have been able to go back to sleep.</p> <p>2 - I have been waking up very early in the morning without being able to go back to sleep, especially if I've gotten out of bed.</p>
	<p>Rating:</p> <input type="checkbox"/>	<p><i>Remember, "normal" means how you're feeling when you're OK.</i></p> <p>QUESTION 14</p> <p><i>When I am feeling normal, I usually sleep about ___ hours each day, including naps.</i></p> <p>0 - I have been sleeping no more than I usually do when I feel normal.</p> <p>1 - I have been sleeping at least one hour more than I usually do when I feel normal.</p> <p>2 - I have been sleeping at least two hours more than I usually do when I feel normal.</p> <p>3 - I have been sleeping at least three hours more than I usually do when I feel normal.</p> <p>4 - I have been sleeping at least four hours more than I usually do when I feel normal.</p>
		<p>QUESTION 15</p> <p>0 - I have not had a heavy feeling in my limbs, back or head.</p> <p>1 - I have had a heavy feeling in my limbs, back, or head, some of the time.</p> <p>2 - I have had a heavy feeling in my limbs, back, or head, a lot of the time.</p>
		<p>QUESTION 16</p> <p>0 - I have not been bothered by backaches, headache, or muscle aches.</p> <p>1 - I have been bothered some of the time by backaches, headache, or muscle aches.</p> <p>2 - I have been bothered a lot of the time by backaches, headache, or muscle aches.</p>
<p>Overall rating for Questions 15-17:</p> <input type="checkbox"/> <p><i>See instructions below:</i></p>	<p>Rating for Question 17:</p> <input type="checkbox"/>	<p><i>Remember, "normal" means how you're feeling when you're OK.</i></p> <p>QUESTION 17</p> <p>0 - I have not been feeling more tired than normal.</p> <p>1 - I have felt slightly more tired than normal.</p> <p>2 - I have been more tired than normal for at least a few hours per day.</p> <p>3 - I have felt tired much of the time most days.</p> <p>4 - I have felt an overwhelming fatigue all of the time.</p>
<p><i>To find your "overall rating," first identify which of Questions 15, 16 and 17 had the highest rating. If your highest rating was a "2", enter your overall rating as a "1". If the highest rating was a "3" or "4" on Question 17, enter your overall rating as a "2". Otherwise, just enter your highest uncorrected score, "0", "1" or "2".</i></p>		

<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 18</p> <p>0 - I have not been putting myself down, or feeling like a failure or that I have let other people down, or feeling guilty about things I have done.</p> <p>1 - I have been feeling like a failure or that I have let other people down.</p> <p>2 - I have been feeling very guilty or thinking a lot about bad things I have done, or bad mistakes I have made.</p> <p>3 - I believe that my being depressed is a punishment for something bad that I've done.</p> <p>4 - I have been hearing voices accusing me of bad things, or seeing things that are scary, that others said were not really there.</p>												
<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 19</p> <p>0 - I have not had any thoughts about dying or about hurting or killing myself, or that life is not worth living.</p> <p>1 - I have had thoughts that life is not worth living, or that I'd be better off dead.</p> <p>2 - I have thought about dying, or wish I were dead.</p> <p>3 - I have thought about killing myself, or I have done something to hurt myself.</p> <p>4 - I have tried to kill myself.</p>												
<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 20</p> <p>0 - I have not been feeling especially tense or irritable, or worrying a lot.</p> <p>1 - I have been feeling somewhat tense or irritable.</p> <p>2 - I have been worrying about little unimportant things — that I wouldn't ordinarily worry about — or I have been excessively tense or irritable.</p> <p>3 - Other people notice that I look or sound tense, anxious, or fearful.</p> <p>4 - I feel tense, anxious, or fearful all of the time.</p>												
		<p>Check off all the following physical symptoms that have <u>bothered</u> you in the past week:</p> <table border="0"> <tr> <td><input type="checkbox"/> <i>dry mouth</i></td> <td><input type="checkbox"/> <i>cramps</i></td> <td><input type="checkbox"/> <i>hyperventilating</i></td> </tr> <tr> <td><input type="checkbox"/> <i>gas</i></td> <td><input type="checkbox"/> <i>belching</i></td> <td><input type="checkbox"/> <i>sighing</i></td> </tr> <tr> <td><input type="checkbox"/> <i>indigestion</i></td> <td><input type="checkbox"/> <i>heart palpitations</i></td> <td><input type="checkbox"/> <i>having to urinate frequently</i></td> </tr> <tr> <td><input type="checkbox"/> <i>diarrhea</i></td> <td><input type="checkbox"/> <i>headaches</i></td> <td><input type="checkbox"/> <i>sweating</i></td> </tr> </table>	<input type="checkbox"/> <i>dry mouth</i>	<input type="checkbox"/> <i>cramps</i>	<input type="checkbox"/> <i>hyperventilating</i>	<input type="checkbox"/> <i>gas</i>	<input type="checkbox"/> <i>belching</i>	<input type="checkbox"/> <i>sighing</i>	<input type="checkbox"/> <i>indigestion</i>	<input type="checkbox"/> <i>heart palpitations</i>	<input type="checkbox"/> <i>having to urinate frequently</i>	<input type="checkbox"/> <i>diarrhea</i>	<input type="checkbox"/> <i>headaches</i>	<input type="checkbox"/> <i>sweating</i>
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<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 21</p> <p>Referring to the physical symptoms listed above:</p> <p>0- I didn't check off any symptoms above.</p> <p>1 - Altogether, the symptom(s) have only been bothering me a little bit.</p> <p>2 - Altogether, the symptom(s) have been bothering me somewhat.</p> <p>3 - Altogether, the symptom(s) have been bothering me a lot.</p> <p>4 - Altogether, the symptom(s) have been making it difficult for me to function.</p>												
<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 22</p> <p>0 - I have not been thinking much about my physical health.</p> <p>1 - I have been worrying about being or becoming physically ill.</p> <p>2 - I have been spending most of my time worrying about my physical health.</p> <p>3 - I have been complaining frequently about how I feel physically, or asking for help a lot.</p> <p>4 - I am sure that I have a physical disease, even though the doctors tell me that I don't.</p> <p>Have you had a specific medical problem this week? If yes, please describe:</p> <hr/> <p>Have you taken any medications in the past week? If yes, please describe:</p> <hr/>												

<p>Rating:</p> <input type="checkbox"/>		<p>Remember, "normal" means how you're feeling when you're OK.</p> <p>QUESTION 23</p> <p>0 - My rate of speech and thought are normal.</p> <p>1 - My speech and physical movements are slightly slowed down, or my thoughts are slightly slower, which has made it difficult for me to concentrate.</p> <p>2 - My physical movements, speech or thoughts are somewhat slow compared to normal, and other people have noticed this.</p> <p>3 - My physical movements are markedly slower, or my speech or thoughts are so slow that it has been hard to have a conversation with me.</p> <p>4 - My physical movements are greatly slowed down, or my speech and thoughts are so slow that it has been difficult for me to think or talk at all.</p>	
<p>Rating:</p> <input type="checkbox"/>		<p>QUESTION 24</p> <p>0 - I have not been restless or fidgety.</p> <p>1 - I have been somewhat restless, or sometimes have been playing with my hands, hair, or other things.</p> <p>2 - I have been very restless, or often have been playing with my hands, hair, or other things.</p> <p>3 - I have trouble sitting still, and need to keep moving about a lot of the time.</p> <p>4 - I am unable to sit still, or have been wringing my hands, biting my nails, pulling my hair, or biting my lips, nearly all the time.</p>	
		<p>In the following question, a "slump" means a <u>temporary</u> reduction in mood or energy from which you recover, at least partially, later in the day.</p> <p>0 - I have not regularly had a slump in my mood or energy in the afternoon or evening.</p> <p>1 - I have regularly had a slump in my mood or energy in the afternoon or evening.</p> <p>If you circled "1" for the question above, please also specify:</p> <p>0 - Once these slumps occur, they usually last until bedtime.</p> <p>1 - I usually come out of these slumps at least an hour before bedtime.</p>	
	<p>Rating:</p> <input type="checkbox"/>	<p>QUESTION 25</p> <p>Please circle the best description of slumps you may be experiencing:</p> <p>0 - I do not have such slumps, or my slumps last until bedtime.</p> <p>1 - Usually, the temporary slumps have been only mild in intensity.</p> <p>2 - Usually, the temporary slumps have been moderate in intensity.</p> <p>3 - Usually, the temporary slumps have been severe in intensity.</p>	
<p>TOTAL OF GROUP A RATINGS:</p> <input type="text"/>	<p>TOTAL OF GROUP B RATINGS:</p> <input type="text"/>	<p>GRAND TOTAL OF ALL RATINGS (A+B):</p> <input type="text"/>	<p><i>In the spaces to the left, add up your ratings for Group A (column 1) and Group B (column 2), and the grand total of all your ratings (Groups A and B).</i></p>

INTERPRETING AND ACTING ON YOUR QUESTIONNAIRE RESULTS

SIGH-SAD-SA

In the sections below, please use the left-hand boxes to write your corresponding ratings from the questionnaire, and then consider how your answers fit with the interpretation and recommendations. If your rating does not fall into the range specified, skip that section and continue below. For example, on the first three sections, if your grand total score is higher than 4, leave the boxes blank and skip down to find the boxes that apply to you.

Grand total = 0 to 4 ↓	Question 1 Rating ↓	<ul style="list-style-type: none"> ▪ Q1 = 0: depression is probably not a current concern. ▪ Q1 = 2 to 3: you reported feeling down, but without many of the usual symptoms of depression. Use the questionnaire again next week – hopefully this is temporary. ▪ Q1 = 4: you reported that you are feeling very depressed even without many of the symptoms that indicate clinical depression. You should talk with someone close about it. If the feeling lasts, you should seek a clinician's guidance.
Grand total = 0 to 4 ↓	Question 2 Rating = 2 to 4 ↓	<ul style="list-style-type: none"> ▪ Q2 = 2 or 3: you reported loss of interest or engagement in activities, without having many of the symptoms that indicate clinical depression. Use the questionnaire again next week – hopefully this is temporary. ▪ Q2 = 4: you reported that you have lost interest in or are not engaging in usual activities without many of the symptoms that indicate clinical depression. Hopefully this is temporary, but you should talk with someone close about it. If the feeling lasts, you should seek a clinician's guidance.
Grand total = 0 to 4 ↓	Question 19 rating = 1 to 4 ↓	<ul style="list-style-type: none"> ▪ Q19 = 1 or 2: you reported thoughts of death or suicide. This is rare but possible if you do not feel otherwise depressed. Check www.befrienders.org for help worldwide. These services are all free and confidential. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them. ▪ Q19 = 3 or 4: you reported intentions of suicide. This is possible, although it does not ordinarily accompany otherwise mild depression. If you are actively thinking about suicide, try to tell someone close about it and go to the nearest emergency room for help or dial your emergency number (for example, 911). Check www.befrienders.org for help worldwide. These services are all free and confidential. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them.
Grand total = 5 to 10 ↓	Question 1 Rating ↓	<ul style="list-style-type: none"> ▪ Your rating indicates that you are experiencing depressive symptoms at a mild level. Hopefully this is temporary, but you should talk with someone close about it. If the feeling lasts, you should seek a clinician's guidance. ▪ Q1 = 0: you also reported, however, that your mood has been normal for you, while low mood is a central symptoms of depression. It is possible that your symptoms reflect another problem, for example, physical illness or a sleep disorder.
Grand total = 5 to 10 ↓	Question 19 Rating = 1 to 4 ↓	<ul style="list-style-type: none"> ▪ Q19 = 1 or 2: Apart from your report of mild depression, you also reported thoughts of death or suicide. This is possible, although it does not ordinarily accompany otherwise mild depression. Check www.befrienders.org for help worldwide. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them. ▪ Q19 = 3 or 4: Apart from your report of mild depression, you also reported intentions of suicide. This is possible, although it does not ordinarily accompany otherwise mild depression. If you are actively thinking about suicide, try to tell someone close about it and go to the nearest emergency room for help or dial your emergency number (for example, 911). Check www.befrienders.org for help worldwide. These services are all free and confidential. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them.

Grand total = 11 to 19 ↓	Question 19 Rating ↓	<ul style="list-style-type: none"> ▪ Your ratings indicates that you are experiencing depressive symptoms at a moderate level. If you have not already done so, you should talk with someone close about it. This may require clinical attention if it lasts as long as two weeks. ▪ Q19 = 1 or 2: you also reported thoughts of death or suicide. It is very important that you get guidance from a clinician. Try to tell someone close about it and check www.befrienders.org for help worldwide. These services are all free and confidential. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them. ▪ Q19 = 3 or 4: you also reported intentions of suicide. It is very important that you get prompt guidance from a clinician. If you are actively contemplating suicide, try to tell someone close about it and go to the nearest emergency room for help or dial your local emergency number (for example, 911). Check www.befrienders.org for help worldwide. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them.
Grand total = 20 or above ↓	Question 19 Rating ↓	<ul style="list-style-type: none"> ▪ Your ratings indicates that you are experiencing clinically significant depressive symptoms. If you have not already done so, you should talk with someone close about it and seek the guidance of clinician if this has lasted longer than a week. ▪ Q19 = 1 or 2: you also reported thoughts of death or suicide. It is very important that you get guidance from a clinician. Try to tell someone close about it and check www.befrienders.org for help worldwide. These services are all free and confidential. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them. ▪ Q19 = 3 or 4: you also reported intentions of suicide. It is very important that you get prompt guidance from a clinician. If you are actively contemplating suicide, try to tell someone close about it and go to the nearest emergency room for help or dial your local emergency number (for example, 911). Check www.befrienders.org for help worldwide. Remember, our questionnaire was designed to help you identify problems, but you have to take the next step to solve them.
Grand total = 10 to 15 ↓	Group B rating = 10 or above ↓	<ul style="list-style-type: none"> ▪ You reported a set of symptoms – which might include fatigue, oversleeping and food cravings – that can be quite severe even without depressed mood. Morning light therapy might be helpful.
Question 11 Rating = 2 ↓		<ul style="list-style-type: none"> ▪ You reported having trouble falling asleep every night. Although this kind of insomnia can accompany depression, it can be troublesome even when someone is not depressed. Sleep disorders can arise for many reasons. Hopefully this is temporary, but if the problem lasts, you should report this to your doctor.
Question 12 Rating = 2 ↓		<ul style="list-style-type: none"> ▪ You reported waking during the night (not just to go to the bathroom). Although this kind of insomnia can accompany depression, it can be troublesome even when someone is not depressed. Sleep disorders can arise for many reasons. Hopefully this is temporary, but if the feeling lasts, you should report this to your doctor.
Question 13 Rating = 2 ↓		<ul style="list-style-type: none"> ▪ You reported waking up too early without being able to go back to sleep. Although this kind of insomnia can accompany depression, it can be troublesome even when someone is not depressed. Sleep disorders can arise for many reasons. Hopefully this is temporary, but if the problem lasts, you should report this to your doctor.
Question 18 Rating = 4 ↓		<ul style="list-style-type: none"> ▪ You reported being bothered by voices accusing you of bad things, or having scary visions. Even if this is temporary or infrequent, you should seek a clinician's guidance.
Question 20 Rating = 3 or 4 ↓		<ul style="list-style-type: none"> ▪ You reported feeling tense, anxious or fearful. Although this feeling often accompanies depression, it can be troublesome even when someone is not depressed. Hopefully this is temporary, but if the feeling lasts, you should seek a clinician's guidance.

Question 21 Rating = 4 ↓		<ul style="list-style-type: none"> ▪ You reported one or more physical symptoms that have been making it difficult for you to function. You should report this to your doctor if this does not pass quickly.
Question 23 Rating = 3 or 4 ↓		<ul style="list-style-type: none"> ▪ You reported that your physical movements, speech or thought have been greatly slowed down. Although this often happens during depression, it can be troublesome even when someone is not depressed. You should report this to your doctor.
Question 24 Rating = 4 ↓		<ul style="list-style-type: none"> ▪ You reported being unable to sit still or acting very nervously. Although this often happens during depression, it can be troublesome even when someone is not depressed. You should report this to your doctor.

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