

## MoodCheck

Patient Name	DOB	Female		
Provider Name	Date	Male	Other	
Part A. Please place a check after the state	ments below that accura	ıtelv describe vou	' <u>.</u>	
During times when I am not using drugs o				
I notice that my mood and/or energy levels shift drastically from tim				
At times, I am moody and/or energy level is very low, and at other ti	mes, and very high.			
During my "low" phases, I often feel a lack of energy, a need to stay need to do.	in bed or get extra sleep, and	l little or no motivation	on to do things I	
I often put on weight during these periods.				
During my low phases, I often feel "blue," sad all the time, or depres	ssed.			
Sometimes, during the low phases, I feel helpless or even suicidal.				
During the low phases, my ability to function at work or socially is i	impaired.			
Typically, the low phases last for a few weeks, but sometimes they la	ast only a few days.			
I also experience a period of "normal" mood in between mood swit ability to function is not disturbed.	ngs, during which my mood	and energy level fee	els "right" and my	
I then notice a marked shift or "switch" in the way I feel.				
My energy increases above what is normal for me, and I often get m	any things done I would not	ordinarily be able to	do.	
Sometimes during those "high" periods, I feel as if I have too much	energy or feel "hyper".			
During these high periods, I may feel irritable, "on edge," or aggress	sive.			
During the high periods, I may take on too many activities at once.				
During the high periods, I may spend money in ways that cause me t	trouble.			
I may be more talkative, outgoing or sexual during these periods.				
Sometimes, my behavior during the high periods seems strange or an	nnoying to others.			
Sometimes, I get into difficulty with co-workers or police during the	ese high periods.			
Sometimes, I increase my alcohol or nonprescription drug use during	g the high periods.			

**Part B.** The statements in Part A (not just those checked) describe me (circle one of the answers below):

Total

Not at all	A little	Fairly well	Very well
(0)	(2)	(4)	(6)
	1 1 2 2	1 1 1 10	~ .

Add the number in parentheses in Part B to your check mark total from Part A.



## **MoodCheck**

## Part C. Please indicate whether any of your (blood) relatives have had any of these concerns:

	Grandparents	Parents	Aunts/Uncles	Brothers/S	isters	Children
Suicide						
Alcohol/Drug Problems						
Mental Hospital						
Depression Problems						
Manic or Bipolar						
Has a health professional ever told you that you have manic-depressive illness or bipolar disorder?				YES	NO	
Have you ever attempted suicide?				YES	NO	

## Part D.

How old were you when you first were depressed? (check one)		As long as I can remember		Grade school	Middle school	High school	18-24	> 24
How many episodes of de depression have you had?		One		2-4	5-6		> 10	
		Excessive energy		Severe insomnia	Agitation	Irritability	Racing thoughts	Talking a lot
How many antidepressants have you tried, if any?	any? None 1		1	2	3	4	>4	
Has an antidepressant you took worked at first, then	d working?			NO		YES		
Do your episodes start gradually, or suddenly ?	Gradually				Can't say		Suddenly	
Do your episodes stop gradually, or suddenly ?		Gradually			Can't say		Suddenly	
Did you have an episode after giving birth?	No	Within 6 months		Within 2 months		Within 2 weeks		
Are your moods much different at different times of	f year?	No effect of time		of year	Yes, seasonal shifts			
When you are depressed, do you sleep differently?		No	Sleep	less	s Sleep more			
When you are depressed, do you eat differently?		No	Eat le	SS	Eat more			
When you are depressed, what happens to your ener	rgy?	Nothing	It vari	es a lot	Very low Extremely low, can hardl		dly move	
In episodes, have you lost contact with reality? (delusions, voices, people thought you were odd) NO YES								

If your total score from Parts A and B is greater than 16; or if you have lots of circles in shaded boxes on this page, you may need to learn more about "mood swings without mania". See <a href="www.PsychEducation.org">www.PsychEducation.org</a> . This is something to learn about, not necessarily about you.

If your total score from Parts A and B is less than 10, and you have few circles in shaded boxes on this page, antidepressants are probably okay, if you and your doctor choose to use them. They can occasionally cause: unusual thoughts, including violent and suicidal ones; irritability; too much energy; and severe sleep problems. Contact your doctor if you think any of these might be happening to you.