Mood Chart

Adapted from Sachs, G (1996): J. Clin. Psychopharm. 16:2(suppl 1) p47S

Date (circle for menses)	Exercise /Medication (enter amounts, note dose *changes*)						Energy/Mood (*can* use two check marks: worst and best for each day)							Sleep (check one, or hours)			Irritability	Events/Notes/Observations
	Exercise type: Walk, Swim, Run, Bike, Etc.	How long	med 1 mg	med 2 mg	med 3 mg	med 4 mg	Low energy/mood: cannot work +++	impaired ++	not impaired +	nl: normal mood	Agitation/ anxiety/ "up": not impaired +	impaired ++	cannot work +++	increased sleep	normal sleep	insomnia	0-3 scale	Questions to ask, connections you suspect; or significant events that might affect mood — interactions, successes, disappointments, anniversaries, illness, losses, etc.
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