

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