

BIPOLAR DISORDER **1011**Mood Chart

Name	Month	. Year

Keep track of how you're feeling. It's a good way to help manage your bipolar disorder symptoms. It allows you to **see patterns to your moods** that you might have missed before, or to see links between how you feel and what's happening in your life. A Mood Chart also can help your doctor **check your progress and change your treatment, if needed.**

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Shade in the days on the chart below to show how you're feeling. Then, beneath that, fill in **other important information.** This includes: How much sleep you're getting, what medicines you take, their side effects, and any events in your life that may have had an impact on you.

	DAY	1	2	3	4	5	6 7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28 2	9 3	30 3
Severe mania (Can't function, or in the hospital)																														
Moderate mania (Trouble functioning)																														
Mild mania (Energized, possibly disorganized)																														
Mild depression (Slight depression, with little trouble functioning)																														
Moderate depression (Trouble function	ning)																													
Severe depression Can't function, or in the hospital)																														
Number of Mood Changes/Day																														
Hours of Nighttime Sleep																														
Menstrual Period (✓) if yes																														

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Fill in all the boxes about your sleep, medicines, side effects, weight, etc.

DAY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Weight (in pounds, weekly)																															
Hours slept (number of hours)																															
Medicines (check if all were taken as prescribed)																															
Side effects (check here and describe below)																															

List all of the medicines you take and any side effects you have experienced.

Name of Medicine	How Much to Take	How Often to Take It	Side Effects

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	6	/7
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	7	

Describe any life events or situations that might be important.

Date	Comments	Date	Comments	Date	Comments	

Questions for my doctor:

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