AMERICAN PSYCHIATRIC CARE
2014 South Tollgate Road, Suite 208
Bel Air, MD 21015
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Mood Disorder Questionnaire

Patient Name: ______________________ D.O.B. __________ Date: __________

Please answer each question to the best of your ability

1. Has there ever been a period of time when you were not your usual self and	**Yes**	**No**
…you felt so good or so hyper that other people thought you were not your normal self or you were so hyper the you got into trouble?	☐	☐
…you were so irritable that you shouted at people or started fights or arguments?	☐	☐
…you felt much more self-confident than usual?	☐	☐
…you got much less sleep than usual and found that you didn't really miss it?	☐	☐
…you were more talkative or spoke much faster than usual?	☐	☐
…thoughts raced through your head or you couldn't slow your mind down?	☐	☐
…you were so easily distracted by things round you that you had trouble concentrating or staying on track?	☐	☐
…you had more energy than usual?	☐	☐
…you were much more active or did many more things than usual?	☐	☐
…you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?	☐	☐
…you were much more interested in sex than usual?	☐	☐
…you did things that were unusual for you or that other people might have thought were excessive, foolish, risky?	☐	☐
…spending money got you or your family in trouble?	☐	☐
2. If you checked YES to more than one of the above, have several of these ever happened during the same period of time?	☐	☐

3. How much of a problem did any of these cause you – like being unable to work; having family, money, or legal troubles; getting into arguments or fights?

☐ No Problem ☐ Minor Problem ☐ Moderate Problem ☐ Serious Problem