

Mood Description Worksheet

This worksheet will help you describe your mood to your doctor at your visit. This will help your doctor understand how your mood affects your daily activities. Check all that apply.

- I have noticed a big change in my sleep habits:**
 - Sleeping more than usual**
 - Not able to sleep at all or sleeping much less than usual**

- My eating habits have changed (please check all that apply):**
 - I am eating much more than usual**
 - I am eating much less than usual**
 - I gained weight without trying**
 - I lost weight without trying**

- I don't have energy to do things that I want or need to do.**

- I feel at times as though my life is not worth living.**

- I can't concentrate on simple things such as reading the newspaper or watching television.**

- I have trouble completing tasks at home or at work.**

- I don't enjoy things that I used to, such as my seeing my family and friends, exercise, and hobbies.**

- I am more angry and irritable with friends, family or coworkers.**

- I think about ways to hurt myself.**

- I often feel very sad, anxious or pessimistic.**

- Other changes in my mood that worry me:**

Please explain _____
