

MOOD AND GOAL TRACKING DIARY FOR THE MONTH OF _____

Enter your information every day and bring the completed diary with you to your next health care professional (HCP) appointment.

Step 1: Record the medications you take every day.

List the primary medications you're currently taking for your moods and the dosage for each. If you take more than five medications, ask your HCP which ones are most appropriate to include.

Medication 1: _____ Amount: _____ Time of day: _____

Medication 2: _____ Amount: _____ Time of day: _____

Medication 3: _____ Amount: _____ Time of day: _____

Medication 4: _____ Amount: _____ Time of day: _____

Medication 5: _____ Amount: _____ Time of day: _____

Check the boxes for each medication you took today.

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
Medication 1																															
Medication 2																															
Medication 3																															
Medication 4																															
Medication 5																															

Step 2: Rate your daily mood.

Check the box that best describes your mood today.

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
ELEVATED																															
Severe																															
Moderate																															
Mild																															
STABLE																															
Mild																															
Moderate																															
Severe																															
DEPRESSED																															

Step 3: List the daily and long-term goals you have set for yourself.

A “daily goal” is something that can be accomplished each day, for example, getting to work on time or completing an exercise routine.

Daily Goal 1: _____

Daily Goal 2: _____

Daily Goal 3: _____

A “long-term goal” is something you can work toward on a daily basis but takes more than one day to accomplish, for example, completing a class or finishing a project.

Long-term goal: _____

Track progress toward your daily and long-term goals. Did you accomplish your daily goals or make progress toward your long-term goal this day? Mark “G” for good progress, “S” for some progress, and “N” for little or none.

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
Daily Goal 1																															
Daily Goal 2																															
Daily Goal 3																															
Long-term Goal																															

Step 4: Match your goal diary with your mood and medication diary above.

Do you see a relationship? Write your comments and thoughts here.

Remember that it’s important for you and your health care professional (HCP) to discuss your diary as well as any questions or concerns you have about your medications or treatment plan. So be sure yours is up-to-date and bring it with you to your next appointment with your HCP.

Key dates to remember:

Next appointment with your HCP _____ Time to refill your medications _____