



HEALTH RECORD ORGANIZER

# MENTAL HEALTH

TRACK • MANAGE • MAINTAIN

This planner belongs to:

# Daily Mood Log



| DATE   | MOOD RATING<br>(1-10) | ENERGY LEVEL<br>(1-10) | ANXIETY LEVEL<br>(1-10) | IRRITIBILITY | SLEEP HOURS |
|--------|-----------------------|------------------------|-------------------------|--------------|-------------|
|        |                       |                        |                         |              |             |
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| NOTES: |                       |                        |                         |              |             |
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|        |                       |                        |                         |              |             |
|        |                       |                        |                         |              |             |

# Mood Disorder Tracker



## DIAGNOSIS (IF APPLICABLE):

☐

DEPRESSION

☐

BIPOLAR DISORDER

☐

SEASONAL AFFECTIVE DISORDER

☐

MOOD INSTABILITY

☐☐

PROVIDER / THERAPIST:

CURRENT MEDICATIONS:



## TRIGGERS

☐

STRESS

☐

SLEEP CHANGES

☐

WEATHER / SEASONAL CHANGE

☐

RELATIONSHIP CONFLICT

☐

WORK / SCHOOL STRESS

☐

MEDICATION CHANGE

☐

## SYMPTOM CHECK

☐

LOW MOOD

☐

LOSS OF INTEREST

☐

FATIGUE

☐

RACING THOUGHTS

☐

IMPULSIVITY

☐

IRRITABILITY

☐

ANXIETY

☐

MOOD SWINGS

☐

SLEEP CHANGES

☐

APPETITE CHANGES

# Mood Disorder Tracker



## COPING STRATEGIES USED

☐

EXERCISE

☐

JOURNALING

☐

THERAPY SKILLS

☐

MEDITATION / BREATHING

☐

SOCIAL SUPPORT

☐

MEDICATION

☐

REST

☐☐

## REFLECTION

### WHAT HELPED IMPROVE MY MOOD TODAY?

|  |
|--|
|  |
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|  |
|  |

### WHAT MADE SYMPTOMS WORSE?

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### THINGS I WANT TO DISCUSS WITH MY THERAPIST OR DOCTOR:

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### NOTES:

# Anxiety Episode Tracker



| DATE  | SITUATION./ TRIGGER | ANXIETY<br>LEVEL (1-10) | THOUGHTS | COPING STRATEGY | OUTCOME |
|-------|---------------------|-------------------------|----------|-----------------|---------|
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| NOTES |                     |                         |          |                 |         |
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**EXAMPLES OF PHYSICAL = RACING HEART - SWEATING - SHAKING - NAUSEA**  
**EXAMPLES OF EMOTIONAL = FEAR - DREAD - IRRITABILITY - OVERWHELM**



| DATE  | TRIGGER | SYMPTOMS | DURATION | COPING STRATEGY |
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| NOTES |         |          |          |                 |
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# Thank You

## FOR PREVIEWING!



You've just viewed a sample of this planner.  
The complete version includes even more pages to help you  
**stay organized, plan with confidence, and reach your goals.**

### THE COMPLETE PLANNER INCLUDES:



#### FULL PLANNER

All pages and  
sections  
included



#### THOUGHTFULLY DESIGNED

Organized layouts  
to keep you  
on track



#### PRINTABLE & CONVENIENT

Print as many  
times as you  
need



#### INSTANT DOWNLOAD

Get started  
right away—  
no waiting!



#### MADE TO SUPPORT YOU

Designed to  
simplify your life  
and save you time



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and start planning your best days ahead.

# printable pages

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