

Bipolar Mood — Tracker & Guide

Understand patterns. Notice changes. Support stability.

Mood naturally changes, but bipolar disorders involve episodes of significant changes in mood, energy and activity that can affect sleep, thinking, behaviour, relationships and daily functioning. Tracking patterns can help you and the professionals supporting you notice changes earlier.

A mood tracker cannot diagnose bipolar disorder. Diagnosis requires an appropriate clinical assessment that considers the pattern, duration, severity and impact of symptoms, along with other possible explanations.

Look beyond “happy” and “sad”

Mood is only one part of the picture. It can be useful to track energy, sleep, activity, irritability, speech, concentration, confidence, impulsivity, medication and daily functioning alongside mood.

Your personal baseline

Start by thinking about what “usual for me” looks like when you are relatively stable: your typical amount of sleep, energy, social contact, spending, activity, speech and ability to concentrate. Changes from your own baseline can be more informative than comparing yourself with somebody else.

Tracking should support you, not take over

A brief daily check-in is often enough. If tracking makes you more anxious or becomes something you feel compelled to complete perfectly, simplify it and discuss this with your clinician.

Daily Mood & Energy Tracker

Use your own experience rather than trying to fit yourself into a label.

Area	Today	Notes
Mood	Very low / Low / Balanced / Elevated / Very elevated	
Energy	Very low / Low / Usual / High / Very high	
Sleep	_____ hours — quality: Poor / OK / Good	
Irritability	0 1 2 3 4 5 6 7 8 9 10	
Activity / drive	Low / Usual / Increased / Very increased	
Speech / thoughts	Slower / Usual / Faster / Racing	
Concentration	Difficult / Mixed / Usual / Very focused	
Confidence	Low / Usual / Higher than usual	
Impulsivity / risk	None / Some / More than usual	
Daily functioning	Difficult / Manageable / Usual / Changed	

Other things worth noting

Medication taken as prescribed? _____ Alcohol/substances: _____

Significant stress/change: _____

Physical health / menstrual or hormonal changes if relevant: _____

Weekly Pattern Tracker

A week can reveal patterns that are difficult to see from one day alone.

Day	Mood -3 to +3	Energy 0–5	Sleep hrs	Irritability 0–5	Notes
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					

Suggested mood scale

-3 very low **-2** low **-1** slightly low **0** usual/balanced **+1** slightly elevated **+2** elevated **+3** very elevated

What changed first this week?

Sleep: _____ Energy: _____

Mood: _____ Behaviour/activity: _____

My Early Warning Signs

Early-warning signs are personal. They may appear before you recognise a larger change in mood.

Possible change	My personal signs
Sleep	Needing less/more sleep, difficulty settling, waking early...
Energy	Sudden increase/decrease, restlessness, exhaustion...
Thinking	Racing thoughts, slowed thinking, unusual certainty...
Speech	Talking more/faster, quieter, withdrawing...
Activity	Many new projects, reduced activity, inability to stop...
Spending / decisions	More impulsive purchases or unusual decisions...
Social behaviour	More outgoing, conflict, isolation, messaging more...
Mood	Elevated, irritable, anxious, hopeless, numb...
Functioning	Work, self-care, relationships or routines changing...

People who may notice before I do

Name / relationship: _____ What might they notice? _____

Name / relationship: _____ What might they notice? _____

My Stability & Support Plan

Protecting routines does not prevent every episode, but predictable support can make changes easier to notice and respond to.

My important anchors

- Consistent sleep/wake routine ■ Medication as prescribed
- Regular meals / hydration ■ Movement / daylight
- Manageable workload ■ Reduced alcohol/substances
- Time to decompress ■ Regular contact with supportive people
- Appointments / professional support ■ Other: _____

If I notice my mood or energy rising significantly

I will: _____

I will contact: _____

I may need to reduce / pause: _____

If I notice my mood falling significantly

I will: _____

I will contact: _____

The smallest self-care tasks I will prioritise: _____

My agreed warning signs that mean I should seek help promptly

Medication

Do not stop or change prescribed medication based only on a mood tracker. Discuss side effects, concerns or changes with the clinician responsible for your treatment.

When to Reach Out

Contact your GP, mental-health team or other appropriate clinician if you notice a significant or sustained change from your usual pattern, particularly if sleep, judgement, behaviour, relationships or functioning are changing.

Seek urgent help

Urgent assessment is important if you or somebody supporting you is concerned about immediate safety, suicidal thoughts or plans, severe deterioration, psychotic symptoms, extreme agitation, markedly risky behaviour, or a level of elevation or depression that is making it difficult to stay safe or care for yourself.

In the UK, if there is immediate danger call **999** or attend A&E.; For urgent mental-health help that is not an immediate emergency, use **NHS 111** and select the mental-health option where available, or contact your local crisis service if you have one.

A Message From Me

Tracking your mood is not about watching yourself for everything that might go wrong.

It is about getting to know your own patterns — what balanced feels like for you, what tends to change first, what helps you stay steady and when it may be useful to ask for support.

Try to look at patterns rather than one difficult day or one energetic morning. Sleep, stress, physical health, medication, relationships and life events can all affect how we feel.

If you live with bipolar disorder, having a plan for both higher and lower mood can make it easier for you and the people around you to recognise when extra support is needed.

You do not have to manage significant changes alone.

Space to Breathe Therapy

This guide is for psychoeducation and self-monitoring. It cannot diagnose bipolar disorder and does not replace individual medical or mental-health assessment, prescribed treatment or crisis care.