

Child's Name: _____

Date: _____

Parent: _____

MDQ

For All Parents to Complete

Now we'd like to ask you about other types of mood symptoms. Has there ever been a period of time when your child was his/her usual self and ...

| | | | |
|----|--|----|-----|
| 1 | ... felt too good or excited? | no | yes |
| 2 | ... was so irritable that he/she started fights or arguments with people? | no | yes |
| 3 | ... felt he/she could do anything? | no | yes |
| 4 | ... needed much less sleep? | no | yes |
| 5 | ... couldn't slow his/her mind down or had thoughts race through his/her head? | no | yes |
| 6 | ... was so easily distracted by things? | no | yes |
| 7 | ... had much more energy than usual? | no | yes |
| 8 | ... was much more active or did more things than usual? | no | yes |
| 9 | ... had many boyfriends or girlfriends at the same time? | no | yes |
| 10 | ... was more interested in sex than usual? | no | yes |
| 11 | ... did many things that were foolish or risky? | no | yes |
| 12 | ... spent too much money? | no | yes |
| 13 | ... used more alcohol or drugs? | no | yes |

| | | | |
|----|--|----|-----|
| 14 | If you checked "YES" to more than one of the above, have several of these ever happened to your child during the same period of time? | no | yes |
| 15 | How much of a problem were any of these to your child--school problems, failing grades, problems with family and friends, legal troubles? Please circle one response only: <div style="display: flex; justify-content: space-around; text-align: center;"> No problem Minor Problem Moderate Problem Serious Problem </div> | | |

Has there ever been a period of time when your child ...

| | | | |
|----|--|----|-----|
| 16 | ... had suspicious or strange thoughts others didn't think were true | no | yes |
| 17 | ... heard voices that nobody else could hear | no | yes |
| 18 | ... saw things that nobody else could see | no | yes |