

CIDI 3.0 Bipolar Disorder Screening Scale

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For use with dry erase marker only.

Patient Name: _____ Date of Visit: _____

I. STEM QUESTIONS

1. Euphoria Stem Question

Some people have periods lasting several days or longer when they feel much more excited and full of energy than usual. Their minds go too fast. They talk a lot. They are very restless or unable to sit still, and they sometimes do things that are unusual for them, such as driving too fast or spending too much money. **Have you ever had a period like this lasting several days or longer?**

Yes No

If this question is endorsed, the irritability stem question is skipped, and the respondent goes directly to the Criterion B screening question.

2. Irritability Stem Question

Have you ever had a period lasting several days or longer when most of the time you were so irritable or grouchy that you started arguments, shouted at people, or hit people?

II. CRITERION B SCREENING QUESTION

3. People who have episodes like this often have changes in their thinking and behavior at the same time, like being more talkative, needing very little sleep, being very restless, going on buying sprees, and behaving in ways they would normally think inappropriate. **Did you ever have any of these changes during your episodes of being excited and full of energy or very irritable or grouchy?**

III. CRITERION B SYMPTOM QUESTIONS

Think of an episode when you had the largest number of changes like these at the same time. During that episode, which of the following changes did you experience?

1. **Were you so irritable that you started arguments, shouted at people, or hit people?**

This question is asked only if the euphoria stem question is endorsed.

2. **Did you become so restless or fidgety that you paced up and down or could not stand still?**

3. **Did you do anything else that was not usual for you—like talking about things you would normally keep private or acting in ways that you would usually find embarrassing?**

4. **Did you try to do things that were impossible to do, like taking on large amounts of work?**

5. **Did you constantly keep changing your plans or activities?**


6. **Did you find it hard to keep your mind on what you were doing?**

7. **Did your thoughts seem to jump from one thing to another or race through your head so fast you could not keep track of them?**

8. **Did you sleep far less than usual and still not get tired or sleepy?**

9. **Did you spend so much more money than usual that it caused you to have financial trouble?**

This is a screening tool and is not intended to provide a diagnosis.

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