

HCL32_C

ID _____

Date ____ / ____ / ____
m m d d y y

Please answer the following questions about your feelings and behaviors DURING THE PAST WEEK:

1. I need less sleep than usual	Yes	No
2. I feel more energetic and more active	Yes	No
3. I am more self-confident	Yes	No
4. I enjoy my work more	Yes	No
5. I am more sociable (make more phone calls, go out more)	Yes	No
6. I want to travel and/or do travel more	Yes	No
7. I tend to drive faster or take more risks when driving	Yes	No
8. I spend more money/too much money	Yes	No
9. I take more risks in my daily life (in my work and/or other activities)	Yes	No
10. I am physically more active (sports, etc.)	Yes	No
11. I plan more activities or projects	Yes	No
12. I have more ideas, I am more creative	Yes	No
13. I am less shy or inhibited	Yes	No
14. I wear more colorful and more extravagant clothes/make-up	Yes	No
15. I want to meet or actually do meet more people	Yes	No
16. I am more interested in sex, and/or have increased sexual desire	Yes	No
17. I am more flirtatious and/or am more sexually active	Yes	No
18. I talk more	Yes	No
19. I think faster	Yes	No
20. I make more jokes or puns when I am talking	Yes	No
21. I am more easily distracted	Yes	No
22. I engage in lots of new things.	Yes	No
23. My thoughts jump from topic to topic	Yes	No
24. I do things more quickly and/or more easily	Yes	No
25. I am more impatient and/or get irritable more easily	Yes	No
26. I can be exhausting or irritating for others	Yes	No
27. I get into more quarrels	Yes	No
28. My mood is higher, more optimistic	Yes	No
29. I drink more coffee	Yes	No
30. I smoke more cigarettes	Yes	No
31. I drink more alcohol	Yes	No
32. I take more drugs (sedatives, anxiolytics, stimulants...)	Yes	No