atient Name:	Date:
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# Young Mania Rating Scale (YMRS)

Instructions: For each item below, circle the response that best describes how you felt or behaved during the past 48 hours.

#### 1. Elevated Mood

- 0 Absent
- 1 Mildly or possibly increased on questioning
- 2 Definite subjective elevation; optimistic; selfconfident; cheerful; appropriate to content
- 3 Elevated, inappropriate to content; humorous
- 4 Euphoric; inappropriate laughter, singing

## 2. Increased Motor Activity/Energy

- 0 Absent
- 1 Subjectively increased
- 2 Animated; gestures increased
- 3 Excessive energy; hyperactive at times; restless (can be calmed)
- 4 Motor excitement; continuous hyperactivity (cannot be calmed)

### 3. Sexual Interest

- 0 Normal; not increased
- 1 Mildly or possibly increased
- 2 Definite subjective increase on questioning
- 3 Spontaneous sexual content; elaborates on sexual matters; hypersexual by self-report
- 4 Overt sexual acts (toward patients, staff, or interviewer)

# 4. Sleep

- 0 Reports no decrease in sleep
- 1 Sleeping less than normal amount by up to one hour
- 2 Sleeping less than normal by more than one hour
- 3 Reports decreased need for sleep
- 4 Denies need for sleep

### 5. Irritability

- 0 Absent
- 2 Subjectively increased
- 4 Irritable at times during interview; recent episodes of anger or annoyance on ward
- 6 Frequently irritable during interview; short or curt throughout
- 8 Hostile, uncooperative; interview impossible

# 6. Speech (Rate and Amount)

- 0 No increase
- 2 Feels talkative
- 4 Increased rate or amount at times, verbose at times
- 6 Push; consistently increased rate and amount; difficult to interrupt
- 8 Pressured; uninterruptible, continuous speech

## 7. Language/Thought Disorder

- 0 Absent
- Circumstantial; mild distractibility; quick thoughts
- 2 Distractible; loses goal of thought; changes topics frequently; racing thoughts
- Flight of ideas; tangentiality; difficult to follow; rhyming; echolalia
- 4 Incoherent; communication impossible

# 8. Thought Content

- 0 Normal
- 2 Questionable plans; new interests
- 4 Special project(s); hyper-religious
- 6 Grandiose or paranoid ideas; ideas of reference
- 8 Delusions; hallucinations

## 9. Disruptive/Aggressive Behavior

- 0 Absent, cooperative
- 2 Sarcastic; loud at times, guarded
- 4 Demanding; threats on ward
- 6 Threatens interviewer; shouting; interview difficult
- 8 Assaultive; destructive; interview impossible

### 10. Appearance

- 0 Appropriate dress and grooming
- 1 Minimally unkempt
- 2 Poorly groomed; moderately disheveled; overdressed
- 3 Disheveled; partly clothed; garish makeup
- 4 Completely unkempt; decorated; bizarre garb

# 11. Insight

- O Present; admits illness; agrees with need for treatment
- 1 Possibly ill
- 2 Admits behavior change, but denies illness
- 3 Admits possible change in behavior; but denies illness
- 4 Denies any behavior change

# Scoring the YMRS

The purpose of each item is to rate the severity of that abnormality in the patient. When several keys are given for a particular grade of severity, the presence of only one is required to qualify for that rating. A severity rating is assigned to each of the eleven items, based on the patient's subjective report of his or her condition over the previous forty-eight hours and the clinician's behavioral observations during the interview, with the emphasis on the latter.

Scoring between the points given (whole or half points) is possible and encouraged after experience with the scale is acquired. This is particularly useful when severity of a particular item in a patient does not follow the progression indicated by the keys.

In scoring the YMRS, the following items are graded on a 0 to 8 scale:

- Irritability
- Speech
- Thought content
- Disruptive/aggressive behavior

The following items are graded on a 0 to 4 scale:

- Elevated mood
- Increased motor activity/energy
- Sexual interest
- Sleep
- Language/thought disorder
- Appearance
- Insight

Citation: Young RC, Biggs JT, Ziegler VE, Meyer DA: A rating scale for mania: reliability, validity and sensitivity. British Journal of Psychiatry 133:429-435, 1978.