Child Name: _____
Date: _____

YMRS - PARENT VERSION

Directions: Please read each question below and circle the answer number which most closely describes your child for the past 24 hours (from pickup time on this date until the next morning).

1. Mood - ***Is your child's mood higher (better) than usual?***

0. No
1. Mildly or possibly increased
2. Definite elevation- more optimistic, self-confident; cheerful; appropriate to their conversation
3. Elevated but inappropriate to content; joking, mildly silly
4. Euphoric; inappropriate laughter; singing/making noises; very silly

2. Motor Activity/Energy - ***Does your child's energy level or motor activity appear to be greater than usual?***

0. No
1. Mildly or possibly increased
2. More animated; increased gesturing
3. Energy is excessive; hyperactive at times; restless but can be calmed
4. Very excited; continuous hyperactivity; cannot be calmed

3. Sexual Interest - ***Is your child showing more than usual interest in sexual matters?***

0. No
1. Mildly or possibly increased
2. Definite increase when the topic arises
3. Talks spontaneously about sexual matters; gives more detail than usual; more interested in girls/boys than usual
4. Has shown open sexual behavior- touching others or self inappropriately

4. Sleep - ***Has your child's sleep decreased lately?***

0. No
1. Sleeping less than normal amount by up to one hour
2. Sleeping less than normal amount by more than one hour
3. Need for sleep appears decreased; less than four hours
4. Denies need for sleep; has stayed up one night or more

Name: _____
Date: _____

YMRS-Parent Continued…

5. Irritability - ***Has your child appeared irritable?***

0. No more than usual
2. More grouchy or crabby
4. Irritable openly several times throughout the day; recent episodes of anger with family, at school, or with friends
6. Frequently irritable to point of being rude or withdrawn
8. Hostile and uncooperative about all the time

6. Speech (rate and amount) - ***Is your child talking more quickly or more than usual?***

0. No change
2. Seems more talkative
4. Talking faster or more to say at times
6. Talking more or faster to point he/she is difficult to interrupt
8. Continuous speech; unable to interrupt

7. Thoughts - ***Has your child shown changes in his/her thought patterns?***

0. No
1. Thinking faster; some decrease in concentration; talking "around the issue"
2. Distractible; loses track of the point; changes topics frequently; thoughts racing
3. Difficult to follow; goes from one idea to the next; topics do not relate; makes rhymes or repeats words
4. Not understandable; he/she doesn't seem to make any sense

8. Content - ***Is your child talking about different things than usual?***

0. No
2. He/she has new interests and is making more plans
4. Making special projects; more religious or interested in God
6. Thinks more of him/herself; believes he/she has special powers; believes he/she is receiving special messages
8. Is hearing unreal noises/voices; detects odors no one else smells; feels unusual sensations; has unreal beliefs

Name: _____
Date: _____

YMRS-Parent Continued…

9. Disruptive-Aggressive Behavior - ***Has your child been more disruptive or aggressive?***

0. No; he/she is cooperative
2. Sarcastic; loud; defensive
4. More demanding; making threats
6. Has threatened a family member or teacher; shouting; knocking over possessions/ furniture or hitting a wall
8. Has attacked family member, teacher, or peer; destroyed property; cannot be spoken to without violence

10. Appearance - ***Has your child's interest in his/her appearance changed recently?***

0. No
1. A little less or more interest in grooming than usual
2. Doesn't care about washing or changing clothes, or is changing clothes more than three times a day
3. Very messy; needs to be supervised to finish dressing; applying makeup in overly-done or poor fashion
4. Refuses to dress appropriately; wearing bizarre styles

11. Insight - ***Does your child think he/she needs help (for his/her behavior) at this time?***

0. Yes; admits difficulties and wants treatment
1. Believes there might be something wrong (but has not asked for help)
2. Admits to change in behavior but denies he/she needs help
3. Admits behavior might have changed but denies need for help
4. Denies there have been any changes in his/her behavior/thinking

Signature of Parent / Guardian: _____

Scoring the Parent Version of the Young Mania Rating Scale (pdf version)

January 11, 2010

The P-YMRS consists of eleven questions that parents are asked about their child's present state. The original rating scale (Young Mania Rating Scale), was developed to assess severity of symptoms in adults hospitalized for mania. It has been revised in an effort to help clinicians such as pediatricians determine when children should be referred for further evaluation by a mental health professional (such as a child psychiatrist), and also to help assess whether a child's symptoms are responding to treatment. The scale is NOT intended to diagnose bipolar disorder in children (that requires a thorough evaluation by an experienced mental health professional, preferably a board-certified child psychiatrist). This version has been tested in a pediatric research clinic with a high number of children with bipolar disorder. The child's total score is determined by adding up the highest number circled on each question. Scores range from 0-60. Extremely high scores on the P-YMRS increase the risk of having bipolar disorder by a factor of 9, roughly the same increase as having a biological parent with bipolar disorder. Low scores decrease the odds by a factor of ten. Scores in the middle don't change the odds much.

The average scores in children studied were approximately 25 for mania (a syndrome found in patients with Bipolar-I), and 20 for hypomania (a syndrome found in patients with BP-2, BP-NOS, and Cyclothymia). Anything above 13 indicated a potential case of mania or hypomania for the group that was studied, while anything above 21 was a probable case. In situations where the odds of bipolar diagnosis are high to begin with (a child with mood symptoms with 2 parents having bipolar disorder), the P-YMRS can be extremely helpful. But for most groups of people, the base rate of bipolar disorder is unknown but low. Then, the most that a high score can do is raise a red flag (similar to having a family history of bipolar disorder).

Even a high score is unlikely to indicate a bipolar diagnosis. The P-YMRS performs similarly to the screening test for prostate cancer, where it will identify most cases of bipolar, but with an extremely high false positive rate. The P-YMRS is presently being studied in a community pediatrics practice to determine its validity in that setting. The P-YMRS is provided here for educational purposes only, and should not be used as a substitute for evaluation by mental health professionals.

The P-YMRS was revised from the Y-MRS originally developed by Young et al and was presented at the First Annual International Conference on Bipolar Disorders, Pittsburgh, June, 1996 (Gracious Barbara L et al). Exploration of its statistical properties are outlined in: **Discriminative Validity of a Parent Version of the Young Mania Rating Scale.** (Gracious, Barbara L, Youngstrom Eric A, Findling, Robert L, and Calabrese Joseph R et al). Journal of the American Academy of Child and Adolescent Psychiatry (2002) 41(11): 1350-1359.