Social Rhythm Log

Part 1. My week

Item	Entry
Name	
Week starting	

Each evening, I write down when I did each of these things, who was with me and my mood, from 0 (very low or down) through 5 (steady, like my usual self) to 10 (very high or revved up). Until my counselor or therapist and I review my first few weeks, I keep my usual routine and simply write it down.

Day	Got up	First contact with another person *Time and who*	Started my main activity *Time and what*	Had dinner *Time and who*	Went to bed	My mood *0 to 10*
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

If I am in crisis

If I am in danger or thinking about suicide, I call or text 988 in the United States or Canada. Elsewhere, I call my local crisis line or emergency number. The numbers and people I will use:

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Part 2. Looking back at my week

My target times

Include: the time my counselor or therapist and I agreed on for an activity, and one thing that will help me keep it. We set targets one at a time.

Activity	My target time	What will help me keep it
Getting up		
First contact with another person		
Starting my main activity		
Having dinner		
Going to bed		

What moved my routine this week

Include: what helped me keep my usual times, and what moved them, such as late nights, travel, visitors, or a change at work or at home.

What helped my routine	What threw my routine off

Changes I noticed in my sleep, energy or mood

Include: how I slept, how my energy and thoughts felt, and anything my counselor or therapist and I agreed to watch for.

One change I will try next week

Include: one routine and one small step toward its target time.

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Clinician guide: using the social rhythm log

- **When it fits.** The log fits interpersonal and social rhythm therapy (IPSRT), which builds work on daily routines into interpersonal psychotherapy for people with bipolar disorder (Frank et al., 2007). It follows the five activities of the brief Social Rhythm Metric: getting up, the day's first contact with another person, the start of the day's main activity, dinner and going to bed (Monk et al., 2002).
- **Start with a baseline.** Have the client complete the log every day and keep to their usual routine until the two of you have reviewed the first weeks. A change made too early in one routine can unsettle another, as when an earlier wake time without an earlier bedtime leaves the client short of sleep and hypomanic (Frank, 2005).
- **Review the log together.** After three or four weeks, look for the routines that vary most, such as bedtimes that move by hours or weekends that differ from weekdays, and for links with the mood ratings. Review the log at each session after that (Frank, 2005).
- **Set targets one routine at a time.** Agree on a target time for one routine, often the time the client gets up, and move toward it in small steps until that routine stays within about an hour from one day to the next. When routines are reasonably regular, plan ahead for events that could unsettle them, such as visitors staying in the home or a trip away (Frank et al., 2007).
- **Keep safety in view.** Ask about thoughts of suicide as part of your usual assessment, check that the crisis numbers on the log are current, and follow your setting's crisis protocol whenever a situation involves risk.

Adapted from the description of the Social Rhythm Metric in Monk et al. (1990), Monk et al. (2002) and Frank (2005). The log gives no score. The layout and wording are original.

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Completed example: Grace (a fictional client)

Grace, 46, is a fictional client who works as an office manager and has bipolar II disorder. She began interpersonal and social rhythm therapy with her therapist, D.L., after a depressive episode. She filled in this log in her fifth week of therapy, from December 7 to 13, 2026, after she and D.L. had reviewed her first four weeks and set a target time for getting up. Grace, her therapist and every detail of the case are invented.

Part 1. My week

Item	Entry
Name	Grace
Week starting	Monday, December 7, 2026

My week

Day	Got up	First contact with another person *Time and who*	Started my main activity *Time and what*	Had dinner *Time and who*	Went to bed	My mood *0 to 10*
Monday	6:45	7:10, Ray	8:30, office	6:30, Ray	10:45	5
Tuesday	6:50	7:15, Ray	8:30, office	6:45, Ray	10:50	5
Wednesday	6:45	7:10, Ray	8:30, office	7:15, alone	11:00	4
Thursday	6:40	7:05, Ray	8:30, office	6:30, Ray	10:45	5
Friday	6:45	7:10, Ray	8:30, office	7:30, coworkers	1:30	6
Saturday	7:45	8:00, Ray	10:00, garden and errands	7:00, Ray and friends	11:15	7
Sunday	7:15	7:30, Ray	9:30, long walk	6:30, her mother	10:45	5

If I am in crisis

Call or text 988. My husband, Ray, and my friend June are my emergency contacts.

Part 2. Looking back at my week

My target times

Activity	My target time	What will help me keep it
Getting up	6:45, every day	The same alarm on weekends, and breakfast with Ray right after.
First contact with another person	Not set yet	

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Activity	My target time	What will help me keep it
Starting my main activity	Not set yet	
Having dinner	Not set yet	
Going to bed	Next to work on	

What moved my routine this week

What helped my routine	What threw my routine off
Keeping the same alarm on the weekend. Breakfast with Ray every day.	A retirement party for a coworker on Friday. I stayed until 12:45 and went to bed at 1:30.

Changes I noticed in my sleep, energy or mood

I slept about six hours after Friday night and felt wired on Saturday, with my thoughts going fast. It settled by Sunday.

One change I will try next week

Choose a bedtime target with D.L. At evening events, leave by 10:30 and keep my 6:45 alarm the next morning.

D.L. and Grace compared this week with her first four. Grace got up within an hour of her 6:45 target on all seven days, weekend included. They looked at Friday night, when she went to bed at 1:30, and at her mood rating of 7 on Saturday, and chose bedtime as the next routine to work on. D.L. asked about sleep, energy and thoughts of suicide, as at every session, and checked that Ray's and June's numbers and 988 were on the log.

References and further reading

Books for clinicians

Frank, E. (2005). *Treating bipolar disorder: A clinician's guide to interpersonal and social rhythm therapy*. Guilford Press. ISBN 978-1-59385-204-7.

Research

Frank, E., Kupfer, D. J., Thase, M. E., Mallinger, A. G., Swartz, H. A., Fagiolini, A. M., Grochocinski, V., Houck, P., Scott, J., Thompson, W., & Monk, T. (2005). Two-year outcomes for interpersonal and social rhythm therapy in individuals with bipolar I disorder. *Archives of General Psychiatry, 62*(9), 996–1004.

Frank, E., Swartz, H. A., & Boland, E. (2007). Interpersonal and social rhythm therapy: An intervention addressing rhythm dysregulation in bipolar disorder. *Dialogues in Clinical Neuroscience, 9*(3), 325–332.

Monk, T. H., Flaherty, J. F., Frank, E., Hoskinson, K., & Kupfer, D. J. (1990). The Social Rhythm Metric: An instrument to quantify the daily rhythms of life. *Journal of Nervous and Mental Disease, 178*(2), 120–126.

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