

**SYNTHETIC EXAMPLE**

Mood Disorder Questionnaire

MDQ - presentation preview

CLIENT

John Doe

ADMINISTERED

Example date

RESPONSE MODE

Self-report

INSTRUMENT

MDQ

SOURCE

**Hirschfeld and
colleagues**

CLINICAL ROLE

**Bipolar-spectrum
screening support**

What this report lays out

- Named instrument, version, and provenance
- Item-level response pattern without source wording
- Methodology, references, and clinical boundary
- Responsible clinician review rather than automated conclusions

CLINICIAN REVIEW REQUIRED

This document demonstrates Lirena's report design using fictional data. It does not represent a scored MDQ result, cannot establish a diagnosis, and must not be placed in a clinical record.

MDQ cannot diagnose bipolar disorder, specify bipolar I versus II, or replace a mood-history interview. False positives and false negatives both occur.



A report designed for clinical review

Clear structure, visible provenance, and an explicit boundary help a clinician review recorded evidence without mistaking a questionnaire for a conclusion.

REVIEW

Adults complete the screen, then a clinician reviews the pattern beside longitudinal history, medication, sleep, substance use, and interview. A positive screen is a reason to assess, not a label.

CONTEXT

Published scoring rules exist in the source literature. This page does not independently verify a cutoff or digital form. Use the official instrument and population notes for your setting.

SOURCE

Confirm the exact form before live use. This catalogue entry does not assign MDQ from the public site.

REPORT PRINCIPLE

Show the evidence, the version, and the boundary. Leave diagnosis and formulation with the clinician.



Item-level layout without source wording

This marketing sample uses invented item numbers and response labels only. It does not reproduce MDQ item wording, and the pattern below is not a real result.

ITEM	ILLUSTRATIVE SCALE POINT	FICTIONAL RESPONSE
1	2 of 5	A little
2	2 of 5	A little
3	1 of 5	Not at all
4	4 of 5	Often
5	5 of 5	Most days
6	2 of 5	A little
7	5 of 5	Most days
8	3 of 5	Sometimes
9	5 of 5	Most days
10	1 of 5	Not at all
11	4 of 5	Often
12	5 of 5	Most days
13	1 of 5	Not at all
14	2 of 5	A little

Item numbers, scale points, and responses on this page are invented for layout demonstration. They are not this instrument's item set, scoring structure, or thresholds.



Source-led by design

Lirena separates published methodology, product implementation, and clinical approval. A citation does not by itself authorize administration or prove a software scoring rule.

INSTRUMENT

The MDQ asks about a cluster of mania/hypomania-related experiences, whether they happened in the same period, and how much they caused problems. It is a screen to support further assessment, not a bipolar diagnosis.

ADMINISTRATION

Adults complete the screen, then a clinician reviews the pattern beside longitudinal history, medication, sleep, substance use, and interview. A positive screen is a reason to assess, not a label.

CLINICAL BOUNDARY

MDQ cannot diagnose bipolar disorder, specify bipolar I versus II, or replace a mood-history interview. False positives and false negatives both occur.

GOVERNANCE

Confirm the exact form before live use. This catalogue entry does not assign MDQ from the public site.

SELECTED REFERENCES

1. Original MDQ paper

Hirschfeld RMA et al. Development and validation of a screening instrument for bipolar spectrum disorder: the Mood Disorder Questionnaire. Am J Psychiatry. 2000;157(11):1873-1875.

SOURCE AND VERIFICATION Confirm the official form with the source before any live workflow.