Anxiety Log



In which situations do you feel anxiety, and how do you cope?

Keep a log of feared situations. Write down what you did, what you said to yourself, what helped and what didn't. Rate your anxiety levels before, during and after the situation.

| | | BEFORE | DURING | | | | | | |
|----|----------------|---------------------------|-----------|----------|---------------------|----------|---------------------------|--|---------------------------|
| | Date / Time | Anxiety Rating 1-10 | Situation | Thoughts | Physical Sensations | Duration | Anxiety Rating 1-10 | What did I do? What did I say to myself? What helped? What didn't Help? | Anxiety Rating 1-10 |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |