Thought Record Sheet – 7 column

| Situation / Trigger | Feelings Emotions – (Rate 0 – 100%) Body sensations | Unhelpful Thoughts / Images | Facts that <u>support</u> the unhelpful thought | Facts that provide evidence <u>against</u> the unhelpful thought | Alternative, more realistic and balanced perspective | Outcome Re-rate emotion |
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| | | | | | STOPP! Take a breath | What am I feeling now? (0-100%) |
| | What emotion did I | What went through my mind? What disturbed me? What did those houghts/images/memories | | | What would someone else say about this situation? What's the bigger picture? Is there another way of seeing it? | What could I do differently? What would be more effective? |
| | feel at that time? What else? How intense was it? | mean to me, or say about me or the situation? What am I responding to? What 'button' is this pressing for | What are the facts? | What facts do I have that the unhelpful thought/s are NOT totally true? Is it possible that this is | What advice would I give someone else? Is my reaction in proportion to the actual | Do what works! Act wisely. What will be most helpful for me or the |
| What happened? Where? When? Who with? How? | What did I notice in my body? Where did I feel it? | me? What would be the worst thing about that, or that could happen? | What facts do I have that the unhelpful thought/s are totally true? | opinion, rather than fact? What have others said about this? | event? Is this really as important as it seems? | situation? What will the consequences be? |