



# UK Therapy Guide

[uktherapyguide.com](http://uktherapyguide.com)

Tel: 0330 111 5227

Week Beginning: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

What do you think is making you feel anxious?	Where are you? (Home, work, etc.)	How does your body feel?	What is your current mood and state of mind?	What is your current anxiety level between 1 and 10? 1= A little or not at all 10= Very anxious	What action did you take to calm yourself down?	Please rate your anxiety level again. 1= A little or not at all 10= Very anxious	Did anything of interest or importance happen to you today?
<i>I've got to do a talk at work tomorrow</i>	<i>I'm at home</i>	<i>I feel sick</i>	<i>I feel low and I can't think straight</i>	8	<i>I ran a bath and made some of my favourite tea</i>	4	

EXAMPLE

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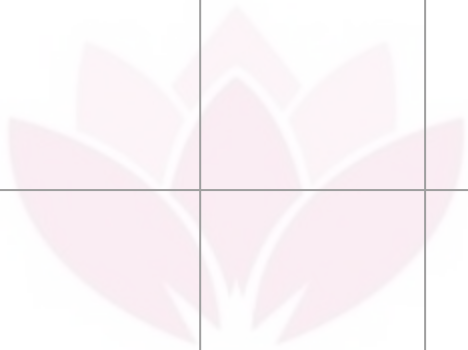
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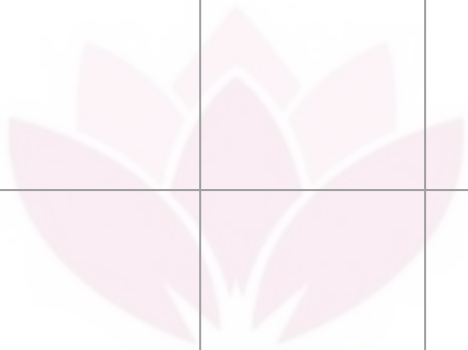
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