



UK Therapy Guide

Passionate about Therapy

Easily finding trusted
Therapy & Counselling
that's right for you

Week Beginning: _____

- support@uktherapyguide.com
- www.uktherapyguide.com
- Tel: 0330 111 5227

Date: _____

Time: _____



What do you think is making you feel anxious?

I've got to do a talk at work tomorrow

Where are you? (Home, work, etc.)

I'm at home

How does your body feel?

I feel sick

What is your current mood and state of mind?

I feel low and I can't think straight

What is your current anxiety level between 1 and 10?
1= A little or not at all
10= Very anxious

8

What action did you take to calm yourself down?

I ran a bath and made some of my favourite tea

Please rate your anxiety level again.
1= A little or not at all
10= Very anxious

4

Please rate your anxiety level again.
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EXAMPLE

Date: _____

Time: _____



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Where are you? (Home, work, etc.)

How does your body feel?

What is your current mood and state of mind?

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10= Very anxious

What action did you take to calm yourself down?

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