## Identifying Physical Signs of Emotions DBT Worksheet

Name:			Date:						
Physician's Name:									
Instructions:									
	dentify the physical responses you experience when you have distressing or overwhelming motions. Further instructions on what to write in the table are written under the row's label.								
	Emotion and Intensity Label your emotion and rank its intensity from 0-10, 0 = no emotion and 10 = most uncomfortable level.	Heart Rate Describe any increase, decrease, or feeling of pounding in your chest.	Body Temperature Describe any increase or decrease in temperature in the different parts of your body.	Muscles Describe any tingling, tension, or shaking, in the different parts of your body.	Energy Describe stamina, strength, or calmness level.	Other List down other body sensations you may have noticed like sweating, headache, appetite loss, etc.			

Which of the emotions listed above caused you the most physical distress?								
		,						
Did you notice a	any changes in y	our mood or ph	ysical sensation	s while completi	ng the chart?			
☐ Yes								
□ No								
Please elaborat	e on your answe	er.						
\\/\bat a_a tha thi		lin the neet to e	linein ete /re du ee	مرمونا ما مام	fort due to			
What are the things you've tried in the past to eliminate/reduce physical discomfort due to emotions?								
Instructions:								
Place a check mark on the activities you are more likely to do next time to reduce the uncomfortable sensations you are feeling:								
<ul> <li>Engage in an intense exercise to burn off energy and stress (e.g., running, weight lifting, basketball, Crossfit, etc.)</li> </ul>								
☐ Take a walk								
Stretch, yoga, Pilates, tai chi, or karate								
<ul> <li>Deep breathing exercises</li> </ul>								
☐ Massage								
Other activity:								

Which of the activities listed above do you think you can commit to doing when you feel physical discomfort?						
Why did you choose those activities to commit to?						
Is there anyone you can trust to support you in engaging regularly in those activities?						
☐ Yes						
□ No						
If yes, who?						
Reflections						
Has this exercise changed the way you view your physical reactions to emotions?						
☐ Yes						
□ No						
Please elaborate on your answer:						
Has this exercise changed the way you respond to overwhelming emotions?						
How helpful was this exercise on a scale of 1 - 10? (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)						
What did you learn from this exercise?						

**Reference:** Pipitone, E., & Doel, A. (2020). Creating a Better Day. In *The DBT Assignment Workbook: 50 Dialectical Behavior Therapy Activities* (pp. 121-124)