Identifying Physical Signs of Emotions DBT Worksheet

Date:

Name:

Physician's Name:											
	Instructions:										
	Identify the physical responses you experience when you have distressing or overwhelming emotions. 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 any changes in your mood or physical sensations while completing the chart?									
☐ Yes									
□ No	□ No								
Please elaborat	e on your answe	er.							
What are the thi	ingo vou'vo triod	lin the neet to e	liminata/raduaa	nhyoical diacom	fort due to				
What are the things you've tried in the past to eliminate/reduce physical discomfort due to emotions?									
Instructions:		.:4:	مرجاء معارات مر		th				
	Place a check mark on the activities you are more likely to do next time to reduce the uncomfortable sensations you are feeling:								
	Engage in an intense exercise to burn off energy and stress (e.g., running, weight lifting, basketball, Crossfit, etc.)								
☐ Take a walk									
Stretch, you	Stretch, yoga, Pilates, tai chi, or karate								
 Deep breathing exercises 									
☐ 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)