

# Setting Boundaries With Relationships Worksheet

## Patient Information

<b>Full Name</b>	
<b>Date</b>	
<b>Age</b>	
<b>Gender</b>	
<b>Contact Information</b>	

## Medical History

<b>Past mental health diagnoses</b>	
<b>Current medications</b>	
<b>Previous therapy</b>	
<b>Hospitalizations</b>	
<b>Family mental health history</b>	

## Questions

<b>Relationship in question</b>	
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<b>Boundary breaches</b>	
<b>Emotional response to breaches</b>	
<b>Past boundary-setting attempts</b>	
<b>Response to past attempts</b>	
<b>Desirable boundary outcomes</b>	

## Tests

<b>Personal space scale</b>	On a scale of 1-10, how comfortable are you with physical touch from the individual?	
<b>Time investment scale</b>	On a scale of 1-10, how often do you feel you need personal time away from the individual?	
<b>Communication effectiveness scale</b>	On a scale of 1-10, how effective has your past communication about boundaries been?	
<b>Comfort level in confrontation</b>	On a scale of 1-10, how comfortable are you confronting someone when a boundary is crossed?	
<b>Perceived support system</b>	On a scale of 1-10, how supported do you feel in this relationship?	