

Date/Time	Situation or Trigger <i>Where, what, who with..</i>	Emotion or Mood <i>Rate intensity 0-100%</i>	Physical sensations <i>What do I feel in my body? Where?</i>	Thoughts or Images <i>How much do I believe it? 0-100%</i>	Behaviour <i>What you did as a result. What helped you cope, or not.</i>