

Dialectical Behavior Therapy 12 MONTH DIARY CARD

NAME: _____



Goals:		DAY OF THE WEEK	Su	M	Tu	W	Th	F	Sa
		DATE							
URGES	0-5*								
	0-5*								
	0-5*								
	0-5*								
	0-5*								
ACTIONS†	Y/N								
	Y/N								
	#								
	Y/N								
	Y/N								
EMOTIONS	LOVE	0-5*							
	JOY	0-5*							
	ANGER	0-5*							
	SADNESS	0-5*							
	FEAR	0-5*							
	SHAME	0-5*							
	MISERY: EMOTIONAL	0-5*							
	MISERY: PHYSICAL	0-5*							

Skills

OVERALL SKILL RATING	0-7‡								
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INSTRUCTIONS: Color in the blocks for each day you worked on each skill.

	1. Wise Mind								
Mindfulness	2. Observe (just notice)								
	3. Describe (put words on, just the facts)								
	4. Participate (enter into the experience)								
	5. Non-judgmental (not good nor bad)								
	6. One-mindfully (only the present moment)								
	7. Effectiveness (focus on what works)								
	Interpersonal Skills	8. Figure out interpersonal priorities							
9. DEAR (Describe, Express, Assert, Reinforce)									
10. MAN—Mindful (Broken Record, Ignore Attacks, Appear confident, Negotiate)									
11. GIVE (Gentle, Interested, Validate, Easy manner)									
12. FAST (Fair, no-Apologies, Stick to values, Truthful)									
13. Finding and Getting People to Like You									
Emotion Regulation	14. Observing and Describing Emotions								
	15. Opposite-to-emotion Action								
	16. Check the Facts								
	17. Problem Solving								
	18. Accumulate Positives (short or long term)								
	19. Build Mastery								
	20. Cope Ahead (plan + imaginal practice)								
	21. PLEASE								
	22. Mindfulness of Current Emotion								
Distress Tolerance	23. STOP or TIPP (get control)								
	24. Pros and Cons								
	25. Distract (Wise mind ACCEPTS)								
	26. Self-Soothe (five senses)/ IMPROVE								
	27. Radical Acceptance								
	28. Turning the Mind								
	29. Mindfulness of Current Thoughts								
	30. Willingness/Half-smiling/Willing Hands								

*Mark intensity of experience from 0 to 5.

- 0 = Didn't happen
- 1 = Kind of noticed the feeling or urge
- 2 = Noticed the feeling or urge
- 3 = Medium feeling or urge
- 4 = Strong feeling or urge
- 5 = Very intense feeling or urge

†List what was done/used, and the number of times in the notes for session below.

‡Rate the skills used from 0 to 7.

- 0 = Not thought about or used
- 1 = Thought about, not used, didn't want to
- 2 = Thought about, not used, wanted to
- 3 = Tried, but couldn't use them
- 4 = Tried, could do them, but they didn't help
- 5 = Tried, could use them, helped
- 6 = Didn't try, used them, didn't help
- 7 = Didn't try, used them, helped

Agenda Items and Notes for Session

URGE TO SUICIDE TODAY: ____ URGE TO SELF-HARM TODAY: ____ URGE TO QUIT THERAPY: ____

CHANGE IN PSYCHOTROPICS: NO CHANGES

NUMBER DAYS COMPLETED DIARY CARD: _____

DBT Weekly Record of Getting Active

Getting Active Hours

Day	Date	Activity Scheduling	What I Did	Activities	Work/School	Notes
Sun	/					
Mon	/					
Tuesday	/					
Wednesday	/					
Thursday	/					
Friday	/					
Saturday	/					

Total Hours:

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Getting Active includes any activities you and your therapist agree on to expand your engagement in work, hobbies, and leisure, and should generally be activities that are scheduled, structured, and out of your home.