

First we will have a chat about how this all started, then we will look at how this affects you on a day to day basis and at the end of the session we will consider what we can do to help.

Onset - (Doing, Feeling, Thinking, Bodily Sensations)

Bodily sensations	Doing
Thinking	Feeling

a) What - description of current problem/ symptoms

How is this issue affecting you now?

b) Where

Any situations that are particularly difficult (or easy) for you?

c) When

Any times of the day / week / year etc that are difficult or easier?

d) Who

Is there anyone who makes it easier? Or harder?

e) Nightmare scenario (why/how)

What is the worst thing about this/ that could happen (nightmare scenario)?

(Aims at finding out: what's the thing keeping any avoidance / anxiety / depression going)



Frequency:

How often is it happening during the week?

How often in a day?

Is it getting any better or worse?

When was the last time it was bad or good?

Intensity:

How bad does it get? (self-rating)

0 - - - - - 1 - - - - - 2 - - - - - 3 - - - - - 4 - - - - - 5 - - - - - 6 - - - - - 7 - - - - -

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Normal

Worst

Duration:

How long does it last for?

Anything that helps or makes it better?

Anything that makes it

worse?

How do you cope?

Is there anything you do less of now?

Is there anything you do more of now?

Think about: Home life, work, leisure, relationships.

Can you tell me a little about a recent time when this was a problem for you.

Bodily sensations

Doing

Thinking

Feeling

Start
after

Event

What happened

Typical day – doing, feeling, thinking, bodily sensations

Waking

Noon

Evening

Sleeping Pattern

Just before

Tell me a bit about your life before this all happened?

Job

Leisure activities

Recent life events

Relationships

Anything else

Impact on life

Others' opinions/attitudes

Beliefs:

What do you think is going on? How do you think you can best manage this?

Hope/fears:

Do you have any hopes for the future? Do you have any fears?

Goals:

If you did feel a lot better, how would your life be different? What would you do that you can't do now?

Mental state

Just a few questions about how you've felt in the last few weeks:

How has your mood been?

How are your energy levels?

Are you still able to enjoy things (enjoyment)?

How do you feel about yourself (self-worth)?

Do you think things will get better (hope / future)?

Do you feel it is somehow your fault (guilt)?

Do you find any troubling thoughts going through your mind?

Have things ever got so bad that you've felt like ending it all (suicidal thoughts)?

Any nervousness or worry recently? Anxiety / major worries / preoccupations / panic attacks?

Any situations that make you particularly anxious?

Pre-morbid personality

Last few questions...

Would you say that this problem has had an effect on you as a person?

How are you different now from how you were before?

How would you describe your personality then? And now?

Predisposing factors

Precipitating factors

Bodily sensations	Doing
Thinking	Feeling

Rationale for treatment plan

What treatment strategies are you planning to use?

Graded exposure for anxiety

Thought diary for anxiety

Graded exposure for pain

Thoughts diary for physical symptoms
(pain)

Graded exposure for fatigue

Thoughts diary for fatigue

Behavioural activation for
enjoyment/mood

Relapse prevention