



<https://posttraumatic-integration.eu/>

Handouts: Daily Thought Record

Insert Daily Thought Record

Date: _____

THE FACTS

Event (Describe the event that made you feel bad/unpleasant/disturbed)	Impact of Event (Describe the emotions you felt)	Intensity (Rate the intensity of emotions from 1 to 10)

ANALYSIS OF THE THOUGHTS

Initial Responses (Describe the automatic thoughts in self-talk. Rate how believable each is – from 1-10)	Impact of Event (Label the distortions)	Intensity (Talk back! Change the distortions to more reasonable thoughts. Rate how much you believe each from 1 to 10)
Ratings:		Ratings:

RESULTS

Based upon your thought analysis, rate again how much you believe your initial responses. Then rate the intensity of your emotions again.



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