

<b>EMOTIONS:</b> Today I feel these emotions... 0 = No Intensity 5 = Highest Intensity										<b>URGES:</b> Today I had the urge to... 0 = No Intensity 5 = Highest Intensity <u>Circle When You Acted on the Urge</u>							<b>SELF-CARE:</b> <i>Fill-In</i>					
Date	Happy Joyful	Angry Bitter	Anxious Fearful	Lonely Empty	Guilt Shame	Depressed Sad	Grief Loss	Fatigued Run-Down	Hopeful	SI/ HI	Self Harm	Binge Purge Restrict	Avoid	Isolate	Lash-out	Self-Invalidate	Alcohol Drug Use	ZzZzZ hr/row	Meds	Exercise	# Meals	Accumulate Positive

**What is your day like? Include anything you feel is important. Significant events. What/Who impacted your day?**

Date	

**Rating Scale for Urges:**

- 0 = NOT on your mind at all throughout the day
- 1 = FLEETINGLY cross your mind at some point of the day
- 2 = ENTERTAINED at points during the day

***It's time to make a skills call if you're urges reach a 3 or higher!***

- 3 = ACTIVELY engaged emotion/urge in your mind – You're thinking on it during the day
- 4 = NOW A PLAN in your mind – you're testing emotion/urge in your mind
- 5 = CONSTANT PERSEVERATION! All components in place for ACTION



