Negative & Intrusive Thoughts Tracker

This worksheet will help you keep track of your intrusive thoughts.



Who were you with? What were you doing? Where were you? When did it happen?

Emotions or Body Sensations

What did you feel? (Rate intensity 0-100%)

Self-Critical Thoughts

What went through your mind? (Rate degree of belief in each thought 1-10) If you had an image or memory, what did it mean to you?



Feel horrible

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Alternative Perspectives

What other ways are there of looking at these thoughts?

What is the evidence that my self-critical thought is true? What am I trying to achieve? Is this way of thinking likely to help me achieve that goal? In what ways could my thinking be inaccurate?



How do you feel now? (Rate degree of belief in each thought now 1-10)

