

Day	Description of situation where panic occurred	breathlessness	Palpitations/ heart racing	Choking	Chest tight/ uncomfortable	Sweating	Dizziness/ Unsteady/ Faint	Unreal/ distant feeling	Nausea	Hot or cold flushes	Trembling/ shaking	Numbness or tingling	Fear of dying/ going mad/ loss of control	Rating of Severity (0- 100)	Panic Frequency per Day

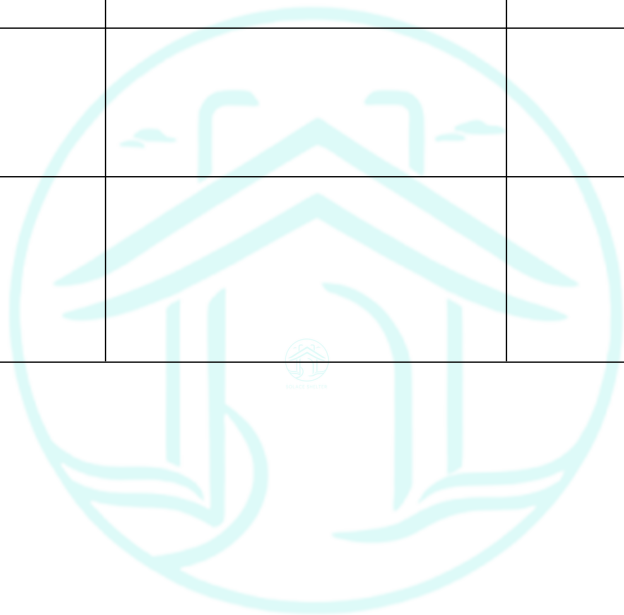
Panic attack diary

MAIN BODY

NEGATIVE

RATIONAL RESPONSE

<u>SENSATION</u>	<u>INTERPRETATION</u> (RATE BELIEF 0-100)	(RE-RATE BELIEF IN NEG. INTERPRETATION 9- 100)



SOLACE SHELTER