

EXPOSURE PRACTICE FORM

Date: _____ Time: _____ Description of task: _____

1. Feared outcome of exposure (“worst case scenario” hypothesis to be tested):

2. Safety behaviors to prevent:

3. How long do you think you can stick with the task?: _____

Every _____ during the exposure, rate the (a) strength of belief in feared outcome, and (b) confidence in your ability to tolerate distress from 0 to 100.

4. Anticipatory Ratings for (a) _____; (b) _____

	Trial 1	2	3	4	5	6	7	8	9	10
(a) Belief										
(b) Confidence										

	11	12	13	14	15	16	17	18	19	20
(a) Belief										
(b) Confidence										

	21	22	23	24	25	26	27	28	29	30
(a) Belief										
(b) Confidence										

5. What was the outcome of the exposure? What did you learn? (Specifically address #1 above)

6. What could you do to vary (“mix up”) this exposure in the future?