

Exposure Tracking Form: Hourly Exposure

Exposure task: _____

Amount of time for each exposure: _____

Safety behaviors or rituals to eliminate: _____

Other guidelines: _____

Subjective Units of Distress Scale (SUDS)

- 0= no anxiety at all; completely calm
- 3= some anxiety, but manageable
- 5= getting tough; wouldn't want to have it all the time
- 7-8= severe anxiety that interferes with daily life
- 10 = worst anxiety you've ever felt

Record one SUDS (0-10) level in each box.

Date:																				
8:00 am																				
9:00 am																				
10:00 am																				
11:00 am																				
12:00 pm																				
1:00 pm																				
2:00 pm																				
3:00 pm																				
4:00 pm																				
5:00 pm																				
6:00 pm																				
7:00 pm																				
8:00 pm																				
9:00 pm																				
10:00 pm																				

Exposure Tracking Example



Exposure task: Touching rag that had contact with door handle							
SUDS (0-10)							
Day/Date	4/15	4/16	4/17	4/18	4/19	4/20	4/21
8:00 am	8	8	7	5	3	4	3
9:00 am	8	6	5	4	2	3	2
10:00 am	8	5	4	4	3	3	.5
11:00 am	7	5	4	4	1	2	0
12:00 pm	7	5	3	3	.5	2	0
1:00 pm	6	4	4	3	1	1	0
2:00 pm	4	5	3	4	1	1	0
3:00 pm	4	3	2	2	.5	2	0
4:00 pm	4	3	1	1	0	5	0
5:00 pm	5	4	1	1	0	0	1
6:00 pm	3	7	1	1	2	0	0
7:00 pm	3	6	2	.5	0	0	0
8:00 pm	3	5	1	1	0	0	0