

DBT Diary Card

Date Started: _____

*Used Skills _____

0=Not thought about or used	1=Thought about, not used, didn't want to	2=Thought about, not used, wanted to	3=Tried but couldn't use them	4=Tried, could do them, they didn't help	5=Tried, could use them, helped	6=Automatically used them, didn't help	7=Automatically used them, helped
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Day Of Week	Highest Urge To:			Highest Rating For Each Day			Drugs/Medications			Actions			Emotions	Optional
	Commit Suicide	Self-Harm	Use Alcohol or Drugs	Emotion Misery	Physical Misery	Joy	Alcohol/drugs (other than prescribed)	What?	Rx meds (as prescribed)	Self-Harm	Judgment	Used Skills*		
	0-5	0-5	0-5	0-5	0-5	0-5	#		Y N	Y N	#	0-7		
MON														
TUE														
WED														
THUR														
FRI														
SAT														
SUN														

Medication changes this week? Yes No

I am going to use _____ skills to reduce/increase _____ this week.

Homework/to do list for this week:

Urges To: (0-5)	Coming into Session:	Belief I Can Change My:	Coming into Session:
Quit Therapy		Emotions	
Use Drugs		Actions	
Commit Suicide		Thoughts	