Exposure Practice Worksheet

BEFORE YOU BEGIN

- 1. Describe the exposure:
- 2. What anxiety reduction strategies/safety behaviors will you give up?
- 3. What feared outcome are you most worried about? **and/or** What are you worried you will not be able to tolerate?
- 4. How will this exposure practice put your fear to the test?
- 5. What are your SUDS before beginning the exposure?

AFTER THE EXPOSURE

- 6. What happened during the exposure -- did your fears come true? Were you able to tolerate the distress? How did your SUDS change over time?
- 7. How was the outcome different from what you expected? What surprised you about the outcome?
- 8. What did you learn from the experience?