

Dialectal Behavior Therapy Diary Card	Instructions: Circle the days you worked on each skill	Filled out in session? Y N			How often did you fill out this side? _____ Daily _____ 2-3x _____ Once			
		Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1. Wise mind	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
2. Observe: just notice (Urge Surfing)	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
3. Describe: put words on	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
4. Participate: enter into the experience	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
5. Nonjudgmental stance	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
6. One-mindfully: in-the-moment	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
7. Effectiveness: focus on what works	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
8. Objective effectiveness: DEAR MAN	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
9. Relationship effectiveness: GIVE	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
10. Self-respect effectiveness: FAST	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
11. Reduce vulnerability: PLEASE	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
12. Build MASTERY	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
13. Build positive experiences	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
14. Opposite-to-emotion action (Alt. Rebellion)	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
15. Distract (Adaptive Denial)	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
16. Self-soothe	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
17. Improve the moment	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
18. Pros and cons	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
19. Radical Acceptance	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
20. Building Structure// Work	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
21. Building Structure// Love	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
22. Building Structure// Time	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
23. Building Structure// Place	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Urge to use (0-5):	Before therapy session: _____	After therapy session: _____			BRTC Diary Card Copyright 1999 Marsha M. Linehan, Ph.D.			
Urge to quit therapy (0-5):	Before therapy session: _____	After therapy session: _____						

Dialectal Behavior Therapy Diary Card				Initials		ID#		Filled out in session? Y N			How often did you fill out this side? _____ Daily _____ 2-3x _____ Once				Date Started	
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Day & Date	Sleep																	
	hrs	When?	#	Specify	#	Specify	Urge	Act?	Judging?	SI	Pain	S-H Urge	Act?	Notes on the day	*Used Skills?			
	0-5	AM/PM					0-5	Y/N	#	Specify	0 - 5	0-5	Specify	0-5	Specify	Y/N	(please be brief)	0-7
Mon																		
Tues																		
Wed																		
Thur																		
Fri																		
Sat																		
Sun																		

BRTC Diary Card Copyright 1999 Marsha M. Linehan, Ph.D.										*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 but they didn't help 5 = Tried, could use them, helped 6 = Didn't try, used them, didn't help 7 = Didn't try, used them, helped				
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