Anxiety Tracking Form			
Day/Situation	***Catch it!*** ***Identify Negative Thought***	***Check it!*** ***Effect on your anxiety/mood***	***Challenge It!*** ***Positive/balance coping statement***
E.g. Stress at work causes me to have anxiety	*E.g. My anxiety is so bad I have trouble leaving the house*	Helpful or Harmful	*E.g. I am feeling anxious at work but next time I will stop and take deep cleansing breathes*
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