

Client Initials _____

BLS Preference _____

Today's Date _____

Episode/Event _____

Narrative Summary _____

Able to complete narrative in first session? YES NO

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____

POD _____ **Today's Date** _____ **POD #** _____

Worst Picture _____

Negative Cognition _____

Positive Cognition _____

Beginning VOC _____ Ending VOC _____

Emotions _____

Beginning SUDS _____ Ending SUDS _____

Body Sensations _____