

**Action...:** The column “**S-H**” refers to whether you engaged in any self-harm or parasuicidal behaviors for the day. Parasuicide is defined as any overt, acute, self-injurious act that, without outside intervention, would result in tissue damage, illness, or death. The act of self-harm or injury is intentional (i.e., not accidental). The “**Lying**” column refers to all overt and covert behaviors that mask telling the truth. It is important to assume a non-judgmental stance in completing this. Put the # of lies told per day in the column. Place an \* in this column to signify a lie has been told somewhere on the card for that day. The “**Joy**” column refers to your rating of joy you experienced for the day. “**Skills**” (0-7) column is used to report the highest skill usage for the day. When making this rating, please refer to the 0-7 “Used Skills” table at the bottom of the card.

**R = Reinforcement:** Place a check in this column to indicate whether you reinforced yourself for non-drug use you are seeking to reduce or abstain from. Reinforcers are functionally defined. A reinforcer is only a reinforcer if it increases the probability of repeating a behavior.

**Apparently unimportant behaviors (AUBs):** Record any AUBs this week, or any occasion in which you engaged in a behavior that is on the chain leading to using drugs, but you treated the event or behavior as if it was irrelevant or unimportant to your drug use. This could include going into a specialty shop that just so happens to be in the neighborhood where you used to buy drugs and not recognizing this as potentially “high risk.”

**Keeping doors to suicide open:** Record any behaviors you engaged in during the week that could facilitate or make it easy to commit suicide. This could include: keeping lethal drugs or weapons, listening to music associated with suicide, lying about suicide plans, holding onto suicide as an option, imagining dying or positive effects of suicide, etc.

**Urges to use (0-5) and urges to quit therapy (0-5):** These both get completed at the beginning and end of the therapy session. “Urges to use” refers specifically to drug urges.

**Belief in control of...:** Using the same 0-5 rating scale, rate your belief regarding your ability to control your **emotions, behavior, and thoughts** before and after your individual psychotherapy session.

The image shows a circular graphic with a grid and the text "DIARY CARD INSTRUCTIONS". The grid is a 7x7 table with columns labeled "Subject", "Urges to Use/Quit", "Emotions/Behaviors", "Suicidal Thoughts", "Skills", "Joy", and "S-H". The rows are labeled "Mon", "Tue", "Wed", "Thu", "Fri", "Sat", and "Sun". Below the grid, there are sections for "Urges to Use/Quit", "Urges to Quit Therapy", and "Belief in Control of...". The text "DIARY CARD INSTRUCTIONS" is written vertically in the center of the circle.

# THE CORRECT WAY TO FILL OUT A DBT DIARY CARD

**Initials and ID:** Your initials are typically the first letter of your first and last name. Your ID is composed of 9 digits : the first 3 digits are taken from the first 3 digits of your social security number; the last 6 digits are taken from your birth date (I.e. March 7th, 1995 would be 030755).

**Filled out in session?** If the card was filled out during the session, circle “Y” for “yes,” otherwise circle “N” for “no.”

**How often did you fill out this side?** In the past week, did you fill out the card daily, 2-3 times, or once?

**Date started:** Note the first date the card was started, including year.

**Day and date:** Record the calendar date under the day of the week.

**Using the 0-5 rating scale:** You’ll notice that many of the columns require you to record a numeric value, from 0 to 5. This is a subjective continuous scale intended to communicate your experience. The anchor

point “0” represents the absence of a particular experience (e.g., no urge). A high score can represent the frequency/pervasiveness of a particular experience (e.g., “5” represents experience where the intensity of the urge wasn’t so bad, but it persisted throughout the entire day). It can also represent the intensity of the experience (e.g., strongest urge imaginable). Choose whichever method of defining the experience (intensity or pervasiveness) that is most effective in communicating your experience. No one way is better than the other. It is important, however, that the same method is used consistently throughout and that the therapist knows which method you have chosen to use.

**Urges to...** The column “**Use**” refers to use of any drug of *abuse* (e.g., over-the-counter meds, prescription meds, street/illicit drugs); The “**Suicide**” column refers to any urges to kill yourself; The “**S-H**” column refers to urges to self-harm or engage in parasuicidal behaviors.

**Emotions:** A number of primary emotions (e.g., sad, shame, anger, & fear) and physical discomfort (e.g., pain) are listed. Rate each emotion using the 0 to 5 rating scale.

**Drugs: Illicit, Alcohol (ETOH), Prescription Medications (prescript.) & Over-the-counter Medications (OTC):**

- “#”: the number of drugs (as described in the specify column) used on this date (e.g., “3” for 3 beers).
- **Specify:** Specify the type of drug used (i.e., beer, mixed drinks, aspirins, heroin, LAAM, Prozac, etc). It’s acceptable to write “ditto” marks in subsequent “Specify” boxes, to indicate daily use.
- **An easier way:** You can use vertical lines through columns to indicate no use (i.e., if you did not use any prescription meds this week, write a “0” in the number space for the first day of non-use, followed by a vertical line.