Logs:

- **Sleep log**
- **Dream log**
- **Food/Water log**
- **Pet log**
- **Medication log**
- **Period log**
- **Mood log**
- **Addiction log**
- **Eating disorder log**

Sleep Log

★ = important

What time did you sleep?
What time did you wake up?
How many hours did you sleep? ★

How did you sleep? ★
Do you feel rested? ★
Did you have any dreams?

Extra (type anything additional here):

Dream Log

★ = important / Form

Title:
Dream or nightmare? ★
Is it recurring?

Topic(s):
Mood in the dream:
Mood in waking up:

Description: ★

Meaning:

Extra (type anything additional here):

Food Log

★ = important

Did you eat?

What did you eat?

Extra (type anything additional here):

Water Log

★ = important

Did you drink?

How much did you drink?

Extra (type anything additional here):

Pet Log

This depends on the type of pet you have. / ★ = important

Groom

Bath, nail clipping, etc.

When did you last groom your pet(s)?
Did you groom all of them?
Which pets' did you groom?
What grooming did you do?

Clean Home

Cage, etc.

When did you last clean your pet's home?
Did you clean all of their homes?
Which pets' homes did you clean?

Medication Log

★ = important

Did you take your medication today? ★

If yes, which medications? ★
What time(s)?

Did you take any over-the-counter pills?

Period Log

★ = important

Period Start: ★

Period End: ★

Period Duration:

Pain Level:

Symptoms:

Mood Log

★ = important

Date:
Time of day:

Mood today ★
- **Emoji(s):**
- **In words:**

Reason for mood today ★
- **Reason in emojis:**
- **Reason in words:**

Extra (type anything additional here):

Addiction Log

★ = important / Form

What's your addiction(s)? ★

If you've been using coping methods, what were they?

Is your coping mechanism safe and healthy?

Has the coping mechanism been helping?

♡ ♡ ♡ • ♡ ♡ ♡ • ♡ ♡ ♡

I've Been Doing My Addiction(s)

Which addiction(s) have you been doing?

How often/frequently have you been doing the addiction(s)?

How do you feel doing the addiction(s)? ★

Why do you feel that way? ★

What was the reason for doing the addiction(s)? ★

How strong is your urge to do the addiction(s) again? ★

Extra (type anything additional here):

♡ ♡ ♡ • ♡ ♡ ♡ • ♡ ♡ ♡

I Relapsed

Which addiction(s) have you been doing?

How do you feel about relapsing? ★

Why do you feel that way? ★

What was your reason for relapsing? ★

How strong is your urge to relapse again? ★

Extra (type anything additional here):

♡ ♡ ♡ • ♡ ♡ ♡ • ♡ ♡ ♡

I Haven't Been Doing My Addiction(s)

How many days have you been clean?

How does that make you feel? ★

Why do you feel that way? ★

How strong is your urge to relapse? ★

Extra (type anything additional here):

Eating Disorder Log

★ = important / Form

Time of day:

Which meal of the day was it?

I Ate

How long ago did you eat?

Where did you eat?

If you were with others, who with?

How do you feel about eating? ★

Why do you feel that way? ★

What did you eat?

What was the portion size of what you ate (in your opinion)? ★

What was the portion size of what you ate (in others' opinion)? ★

Were you mindful of your eating?

How mindful were you of your eating?

Did you enjoy what you ate?

How come?

Are you happy with your food choices?

Why do you feel that way?

How hungry were you <u>before</u> the meal? ★

How hungry are you <u>after</u> the meal? ★

How energetic were you <u>before</u> the meal?

How energetic are you <u>after</u> the meal?

Are you in any physical pain? ★

If yes, what are those pains?

Extra (type anything additional here):

♡ ♡ ♡ • ♡ ♡ ♡ • ♡ ♡ ♡

I Haven't Ate

How long ago should you have eaten?

Did you miss or skip the meal? ★

How do you feel about missing the meal?

Why do you feel that way?

Why did you skip the meal?

How do you feel about skipping?

Why do you feel that way?

How hungry were you when you should have eaten?

How hungry are you <u>now</u>? ★

How energetic did you feel <u>before</u>?

How energetic do you feel <u>now</u>?

Are you in any physical pain? ★

If yes, what are those pains?

Extra (type anything additional here):

♡ ♡ ♡ • ♡ ♡ ♡ • ♡ ♡ ♡

Behaviors

Which behavior(s) do you do? ★

Have you done any of these behaviors today? ★

Yes

Which behavior(s) did you do?

How does that make you feel? ★

Why do you feel that way? ★

What was the reason for doing those behaviors? ★

How strong is your urge to do those behaviors again? ★

Extra (type anything additional here):

No

How does that make you feel? ★

Why do you feel that way? ★

How strong is your urge to relapse? ★

Extra (type anything additional here):