### EMOTION REGULATION WORKSHEET 14A (p. 1 of 3)

(Emotion Regulation Handout 20a)

### **Target Nightmare Experience Forms (Set of 3)**

Due Date:	Name:	Week Starting:
Include sensory thoughts associa	descriptions (sights, sme tted with this dream, inclu	e distressing dream in as many details as possible. Ills, sounds, tastes, etc.). Note the feelings, images, and ading assumptions about yourself. Be as specific as ad when it ends. (Use the back of this sheet if necessary.)
In my dream,		

From DBT Skills Training Handouts and Worksheets, Second Edition, by Marsha M. Linehan. Copyright 2015 by Marsha M. Linehan. Permission to photocopy this worksheet is granted to purchasers of DBT Skills Training Handouts and Worksheets, Second Edition, and DBT Skills Training Manual, Second Edition, for personal use and use with individual clients only. (See page ii of this packet for details.)

(continued on next page)

## EMOTION REGULATION WORKSHEET 14A (p. 2 of 3)

### Changed Dream Experience Form

Due Date:	Name:	Week Starting:
sensory descript thoughts associa possible. Be sure	ions (sights, smells, soun ated with this dream, inclu e the change you put in o nightmare. Note when the	changed dream in as many details as possible. Include dds, tastes, etc.). Please note the feelings, images, and ding assumptions about yourself. Be as specific as ccurs <i>before</i> anything traumatic or bad happens to you dream begins and when it ends. (Use the back of this
In my dream,		

(continued on next page)

# **EMOTION REGULATION WORKSHEET 14A** (p. 3 of 3)

## Dream Rehearsal and Relaxation Record

Week Starting:	f the week. Then write down what you did to practice dream rehearsal and relaxation during the v	our nightmare (Put a 0 if you did not have the nightmare) Continue practicing until you do not b
Name:	t down the days of th	>
Due Date:	In the left column, put down the days of t	the morning write down the intensity of

oversity or and to practice dream rehearsal and relaxation during the week. In 0 if you did not have the nightmare.) Continue practicing until you do not have the rne morning write down the intensity of your nightmare. (Put a nightmare again.

Day	Describe daytime visual rehearsal and relaxation	Negative emotion intensity (0–100)	Describe daytime visual rehearsal and relaxation	Negative emotion intensity (0–100)	Describe daytime visual rehearsal and relaxation	Nightmare intensity (0–100)
		Start:		Start: End:		
		Start:		Start: End:		
		Start:		Start: End:		
		Start:		Start: End:		
		Start:		Start: End:		
		Start:		Start: End:		
		Start:		Start:		