

TABLE 4.2. Instructions for Helping a Client Complete the DBT Diary Card

1. **Name:** Put here the client's name, initials, or clinical ID.
2. **Filled Out In Session?** If the card was filled out during the session, have the client circle "Y" for "yes"; otherwise circle "N" for "no."
3. **How Often Did You Fill Out [This Side]?** In the past week, did the client fill out the card daily, 2–3 times, or once?
4. **Date Started:** Ask the client to note the first date the card was started, including year.
5. **Day of Week:** Instruct the client to record information for each day of the week.
6. **Using the 0–5 Rating Scale:** You'll notice that many of the columns require the client to record a numerical value from 0 to 5. This is a subjective, continuous scale intended to communicate the client's experience along a variety of behaviors or experiences. The anchor point 0 represents the absence of a particular experience (e.g., no urge); the anchor point 5 refers to the strongest degree of the experience (e.g., strongest urges imaginable).
7. **Urges to . . . :** The "**Commit Suicide**" column refers to any urges to commit suicide. The "**Self-Harm**" column refers to urges to engage self-harm or in any self-injurious behaviors. The "**Use Drugs**" column refers to use of any drug of *abuse* (e.g., over-the-counter meds., prescription meds., street/illicit drugs)—or, for clients not using drugs to any urge to escape.
8. **Highest Ratings** refers to ratings of intensity of emotional misery, intensity of physical misery or pain, and degree of joy (or happiness) experienced during the day. Have the client rate each emotion daily, using the 0–5 rating scale.
9. **Drugs/Medications:** For alcohol, have the client put down how many drinks and what type of alcohol (e.g., "3" for 3 beers). For illegal drugs, have the client specify the type of drug used (e.g., heroin) and how much was used. For p.r.n./over-the-counter medications, have the client put down how many doses and what type of medication was taken. For meds. as prescribed, if taken as prescribed, have the client put a "Y" for yes; if not taken as prescribed (either too much or too little, or some medications but not others), have the client put down an "N" for no.
 - Write "ditto" marks in subsequent specify boxes, to indicate use is the same as the previous day.
 - An Easier Way: The client can use horizontal lines through rows and vertical lines through columns to indicate no use. For instance, if the client didn't use any prescription meds. this week, a vertical line down the "Y/N" column under "Meds. as Prescribed" is OK. Or if the client didn't use alcohol, over-the-counter meds., or prescription meds. on Wednesday, then a horizontal line may be drawn through the corresponding boxes for Wednesday.
10. **Actions . . . :** The column "**Self-Harm**" refers to any intentional self-harm or suicide attempt. The "**Lied**" column refers to all overt and covert behaviors that mask telling the truth. It's important for the client to assume a nonjudgmental stance in completing this. Instruct the client to put the number of lies told per day in the column, and place an * in this column to signify lying on the diary card. The **Used Skills** (0–7) column is used to report the highest skill usage for the day. When making this rating, the client should refer to the 0–7 "**Used Skills**" table just under the columns.

The last two columns are optional. Two columns are for tracking specific emotions, and two are for any other behaviors you and the client want to track. Note that there is not a rating scale for these, so when you and the client are deciding what to track, also decide how to track it—for example, with a "Y," "N," a 0–5 or 0–7 scale, or by describing what and how much (i.e., "What?" and #).
11. **Med. Change This Week:** Instruct the client to write down any changes in prescribed medications. These changes may consist of modifications in the dosage (increase or decrease) of the medications (e.g., increase from 5 mg to 10 mg; a decrease from 20 mg to 10 mg), the dropping of a medication, or the addition of a new medication. If there is insufficient room, the client should describe these on a separate piece of paper.
12. **Homework Assigned and Results This Week:** Have the client record any behaviors assigned for the week, describe what was done, and indicate what the results were.
13. **Urges to Use (0–5) and Urges to Quit Therapy (0–5):** Have the client rate the intensity of *current* urges to engage in these behaviors, at the beginning of the session.
14. **Skills Focus This Week:** Instruct the client to write down any skills that are specifically focused on, used, or practiced during the week. This space can also be used to write down what skills need more focus during the week.
15. **Belief I Can Change or Regulate . . . :** Using the same 0–5 rating scale, rate your belief regarding your ability to change or regulate your *emotions*, *actions*, and *thoughts* as you start your therapy session.