

# HOMEWORK RECORD

Client Name: \_\_\_\_\_ Session # \_\_\_\_\_ Date: \_\_\_\_\_

Practitioner Name: \_\_\_\_\_ Email: \_\_\_\_\_

## Homework Assignment

Where did you complete this homework session (home, work, gym, etc.)? \_\_\_\_\_

Degree of success? ☐ None ☐ Somewhat ☐ Acceptable ☐ Very good ☐ Excellent

Subjective value of session? \_\_\_\_\_ (1 to 7, poor to excellent)

Did you record data? ☐ YES ☐ NO

Did you do any self-observation (e.g., your exhale)? If so, what was it and what did you learn?

What new breathing behaviors did you work on? If so, what were they, and what did you do?

What did you learn about your symptoms, deficits, or complaints and how they might be related to your breathing?

Did you challenge yourself? If so, what were the specific challenges, and how did you do?

Did you work on any emotions associated with breathing (e.g., fear), if any? What did you learn?

Did you do any negative practice? If so, what did you do and what did you learn?

What were your successes during this session, if any? What did you learn?

What were your difficulties during this session, if any? What did you learn?

Have you observed positive changes in your breathing and its effects on you, if any?