

EXERCISE: Obsessive-Thinking Checklist

In the space provided, record your repetitive distressing thought, image or memory:

Next, place a tick (✓) beside the statements that describe your experience with this thought, image, or memory. If a statement is irrelevant, leave it blank.

- _____ 1. *The same thought, image, or memory pops into my mind over and over again.*
- _____ 2. *It is very difficult to get the intrusive thought out of my mind.*
- _____ 3. *When I have the intrusive thought, it makes me feel more upset or distressed.*
- _____ 4. *I really don't want to have the intrusive thought.*
- _____ 5. *I've developed certain compulsive rituals to deal with the intrusive thought, like washing, checking, redoing, rereading, or reordering.*
- _____ 6. *I realize the intrusive thought is excessive or even absurd.*
- _____ 7. *I can't ignore the intrusion; it completely captures my attention.*