
Information from your Patient Aligned Care Team

Action Plan for Anxiety

Anxiety is a natural response to some situations—it is our body’s way of preparing to act quickly. You are not alone, many people feel overly anxious for long periods of time. There are things you can do to decrease your anxiety!

RELAXATION

Relaxation can take place in seconds and does not require a quiet environment. When stressed call a 30 second, 3 minute or 10 minute time out. Deep breathing, visualizing a peaceful place or doing something you enjoy.

GET HEALTHY / BE ACTIVE

Being active is good for your mind and body. The brain releases chemicals that make you feel good. Simple changes in your day can increase your activity level and decrease your anxiety.

SOCIAL CONNECTIONS

Play and spend time with others. Recharge your battery with pleasurable activities and by spending time with family and friends. Discover what activities or hobbies relax you.

MEDICATIONS

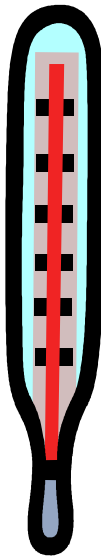
If your provider has prescribed medication for your anxiety, take as prescribed, not when you notice symptoms. If you forget a dose do not double dose, just take it at the next scheduled time. **DO NOT** discontinue medication suddenly, talk with your provider.

Anxiety Thermometer

Check your anxiety regularly to keep it at manageable levels.

Circle the number (0-10) that best describes how much anxiety you have been experiencing in the past week including today:

10
9
8
7
6
5
4
3
2
1



The following describes how I feel when I am at:

1= _____

5= _____

10= _____

Relaxation Strategies

When you are feeling anxious what relaxes you?

Remember relaxation can occur within seconds—simply telling yourself to “STOP” and “BREATHE” can be a quick and effective way to reduce stress.

Let's Practice!

1. First rate your current level of anxiety:

0 1 2 3 4 5 6 7 8 9 10

No High

2. Practice telling yourself to

“STOP” &

“BREATHE”

3. Notice if this strategy helped your anxiety level.

0 1 2 3 4 5 6 7 8 9 10

No High

The Center for Integrated Healthcare gratefully acknowledges the Behavioral Health Lab (BHL), Louisville KY VAMC for authorship of information contained within this brochure.

MY ACTION PLAN

1. I will:

Frequency: _____ times a _____

Completion date: _____

How confident am I that I will do this plan:

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

2. I will:

Frequency: _____ times a _____

Completion date: _____

How confident am I that I will do this plan:

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

Contact Information:

Clinician's Name:

Clinician's Number:

24-Hour Suicide Prevention Hotline: 1-800-273-8255

My appointment is:

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____