

Panic Diary

Track, understand and find patterns

A panic diary is not about watching yourself constantly or proving that you should have coped differently. It is a way to capture useful information about what was happening before, during and after a panic episode so that patterns become easier to recognise.

Panic can feel unpredictable when you are inside it. Over time, a diary may show connections with particular situations, sensations, thoughts, sensory environments, sleep, stress, changes in routine, avoidance or other pressures.

What to record

What happened? Where were you and what was going on?

What did you notice first? A thought, sensation, image, memory or feeling?

What did your body do? Record sensations without judging them.

What did panic predict? What were you frightened might happen?

What did you do? Stay, leave, seek reassurance, ground yourself, call someone?

What happened afterwards? What helped the intensity reduce?

Keep entries brief if that makes the diary easier to use. A few words, symbols, ticks or drawings are enough.

Important

Physical symptoms should not automatically be assumed to be panic. New, severe, unusual or concerning symptoms may need appropriate medical assessment.

My Panic Diary — Episode Record

Date: _____ Time: _____ Where: _____

1. What was happening just before panic increased?

2. What did I notice first?

☐ Thought ☐ Body sensation ☐ Image/memory ☐ Emotion ☐ Environment ☐ Not sure

What did I notice? _____

3. What sensations did I experience?

☐ Racing/pounding heart ☐ Shaking ☐ Dizziness ☐ Sweating
☐ Tightness ☐ Nausea ☐ Tingling ☐ Hot/cold ☐ Breath changes
☐ Feeling unreal/disconnected ☐ Other: _____

4. Panic intensity

At its strongest: 0 1 2 3 4 5 6 7 8 9 10

5. What was I frightened might happen?

6. What did I do next?

What Helped?

This page helps you look at the episode after the intensity has reduced.

What did I try?

Strategy / response	Helped?	What I noticed
Grounding / orienting	☐ Yes ☐ A little ☐ No	_____
Comfortable breathing	☐ Yes ☐ A little ☐ No	_____
Reduced sensory input	☐ Yes ☐ A little ☐ No	_____
Movement	☐ Yes ☐ A little ☐ No	_____
Support from someone	☐ Yes ☐ A little ☐ No	_____
Stayed with situation	☐ Yes ☐ A little ☐ No	_____
Took a planned break	☐ Yes ☐ A little ☐ No	_____
Other	☐ Yes ☐ A little ☐ No	_____

What happened compared with what panic predicted?

Panic predicted:

What actually happened:

What would I like to remember next time?

My Weekly Panic Pattern Tracker

You do not need to complete this every week. It can be useful for a short period when you are trying to understand patterns.

Day	Panic / strong anxiety?	Intensity	Situation / possible trigger	What helped
Monday	■ Yes ■ No	___/10	_____	_____
Tuesday	■ Yes ■ No	___/10	_____	_____
Wednesday	■ Yes ■ No	___/10	_____	_____
Thursday	■ Yes ■ No	___/10	_____	_____
Friday	■ Yes ■ No	___/10	_____	_____
Saturday	■ Yes ■ No	___/10	_____	_____
Sunday	■ Yes ■ No	___/10	_____	_____

At the end of the week

Did I notice a time-of-day pattern? _____

Were particular places or situations repeated? _____

Was panic more likely when I was tired, stressed or overloaded? _____

What seemed to help most consistently? _____

Understanding Patterns Without Blaming Yourself

Once you have several entries, look across them rather than focusing only on one difficult episode.

Possible patterns to explore

- particular body sensations that tend to start the cycle
- catastrophic thoughts or images that repeat
- busy, noisy, hot or crowded environments
- travel, meetings, appointments or being far from a perceived safe place
- lack of sleep or prolonged stress
- repeatedly checking the body or seeking reassurance
- immediately escaping situations
- anticipatory anxiety before a feared event

Safety behaviours and avoidance

When something feels dangerous, it is understandable to try to protect yourself. Some behaviours provide short-term relief but can unintentionally reinforce the idea that you were only safe because you escaped, checked, avoided or received reassurance. A diary can help identify these patterns so they can be explored carefully and gradually, ideally with appropriate professional support when panic is significantly restricting your life.

What else was going on?

Panic does not happen in a vacuum. Consider workload, grief, conflict, illness, hormonal changes, sensory overload, major life changes, reduced recovery time and other pressures. The purpose is not to find one perfect cause but to understand the wider picture.

Notice progress differently

Progress is not only 'I never panicked.' It may be recognising panic earlier, staying in a situation a little longer, recovering more quickly, reducing checking, asking for appropriate support, or feeling less frightened by familiar sensations.

A Message From Me

When panic has frightened you, it is easy to look back and focus on what you wish you had done differently. Try to use this diary for understanding rather than criticism.

You are gathering information. You are learning what your panic tends to latch onto, what happens in your body, which environments make things harder and which responses genuinely support you.

You do not need to complete every box after every episode. Sometimes a date, an intensity score and a few words are enough. The diary needs to be useful to you, not another task you feel pressured to perform perfectly.

Over time, look for the small changes as well as the difficult days. Perhaps you recognised what was happening sooner. Perhaps you used a grounding strategy. Perhaps you stayed for two minutes longer. Perhaps you recovered without as much reassurance. Those changes matter.

If panic is frequent, severe, or leading you to avoid important parts of your life, professional support can help you understand the cycle and work towards reducing its impact.

Space to Breathe Therapy

Safety note: New, severe or concerning physical symptoms should not automatically be attributed to panic. Seek appropriate medical advice when needed. In an emergency, call 999 or attend A&E.;

This diary is a psychoeducational self-help resource and is not a substitute for individual medical or psychological assessment or treatment.