

TRIGGER TRACKING LOG

Downloadable worksheet • Use in-session or between sessions

Want structured treatment instead of coping forever? Request a consultation at muradcounseling.com.

Functional Analysis Before Exposure Work

Why Trigger Tracking Matters (And Why Most People Do It Wrong)

Most people log triggers like this:

“I felt anxious.”

“Crowded place.”

“Got intrusive thought.”

That’s not tracking. That’s labeling.

If we want to weaken OCD, we need to understand:

- What activated the obsession
- What the brain predicted
- What behavior followed
- What reinforced it

Patterns maintain OCD.

This log is designed to expose those patterns.

This is not emotional journaling.

This is behavioral data collection.

What Counts as a Trigger?

Triggers are not only external events.

They include:

- Physical sensations (heartbeat, dizziness, arousal, tension)
- Emotions (guilt, boredom, anger, shame)

- Environmental cues (location, objects, people)
- Memory activation
- Internal images
- Random intrusive thoughts

OCD does not require logic to activate.

It requires uncertainty.

Pro Tip from Felix

The most powerful triggers are subtle internal states.

Fatigue. Boredom. Stress. Sexual arousal. Silence.

If you only log obvious triggers, you miss 60% of what drives your loop.

Internal triggers are exposure gold.

Daily Log Entry Template

Date: _____

Situation (Where were you? What was happening?):

External trigger (if any):

Internal trigger (emotion, sensation, memory, thought):

Exact intrusive thought or fear:

Predicted catastrophe:

Anxiety level (0-100): _____

What urge did you feel?

- Check
- Avoid
- Reassure
- Confess
- Mentally review

- Google
- Neutralize
- Seek certainty
- Other: _____

Did you perform the compulsion?

Yes / No

If yes, what specifically?

Anxiety after compulsion (0-100): _____

Pattern Identification Section (End of Week Review)

After 5-7 entries, step back.

What time of day shows the most activation?

Which internal states appear repeatedly?

Which feared themes show up most often?

Which compulsions do you default to?

What percent of your compulsions are mental vs. behavioral?

Most people underestimate mental rituals.

Rumination is not “thinking it through.”

It is a compulsion if its purpose is relief.

Functional Analysis Grid

Pick one entry and map it:

Trigger → Obsession → Compulsion → Relief → Long-term Reinforcement

Write it cleanly:

Now ask:

What would have happened if I resisted the compulsion for 10 minutes?

Be realistic. Not what OCD says, what evidence suggests.

Pro Tip from Felix

Don't wait until anxiety is high to track.

Log mild triggers too.

Exposure planning fails when people only track extreme spikes.

Your hierarchy should include the boring 3/10 triggers.

Those build tolerance quietly and efficiently.

Exposure Translation Section

Now we convert data into exposure targets.

Identify the most common trigger theme:

Rank intensity (0-100): _____

Smallest exposure related to this trigger:

Predicted distress: _____

Predicted outcome (fear prediction):

Compulsion to resist during exposure:

What uncertainty must you allow?

This is where trigger tracking becomes treatment.

Without this translation, tracking becomes procrastination.

Clinical Foundations

Foa, E. B., & Kozak, M. J. (1986). Emotional processing theory.

Abramowitz, J. S. (2006). Understanding and treating OCD.

Craske, M. G., et al. (2014). Inhibitory learning model of exposure therapy.

This worksheet reflects principles of functional analysis, behavioral conditioning, and exposure-based learning.

Final Note

Trigger awareness does not reduce OCD.

Response prevention does.

Tracking is useful only if it informs action.

If you would like structured ERP guidance tailored to your subtype and reinforcement pattern, request a consultation.