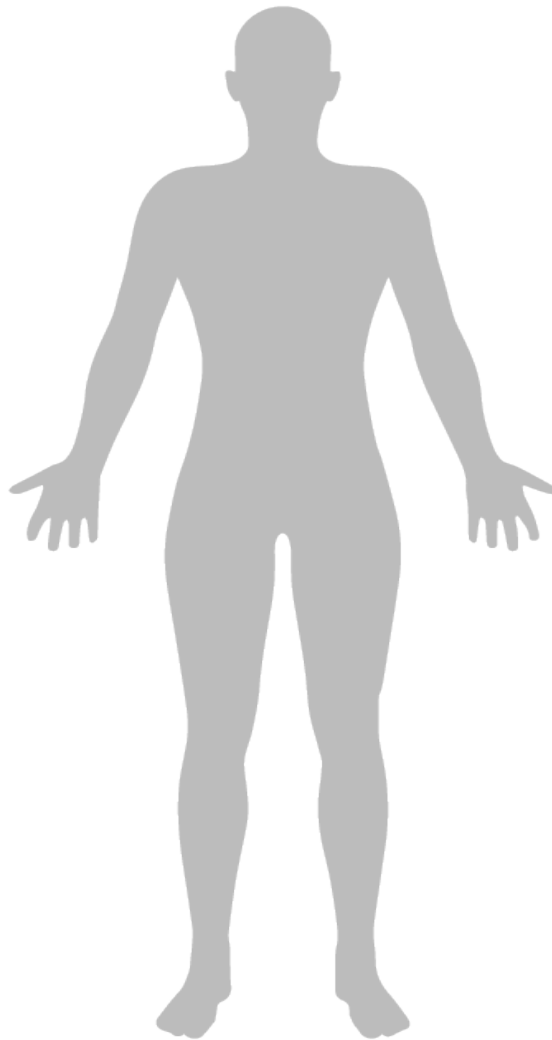




## BodyScan

### **Description & Instructions**

BodyScan links the physical sensations with emotions/feelings you have. For example, gladness can feel light, tingly and warm all over. While doing this exercise notice sensations in all parts of your body. Circle the part of the body where you feel the sensation then answer the questions following.



Notice any **sensations** like tightness, heaviness or heat:

- |                                     |                                    |                                     |
|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Tight      | <input type="checkbox"/> Throbbing | <input type="checkbox"/> Bloating   |
| <input type="checkbox"/> Heavy      | <input type="checkbox"/> Shaky     | <input type="checkbox"/> Numb       |
| <input type="checkbox"/> Burning    | <input type="checkbox"/> Queasy    | <input type="checkbox"/> Cold       |
| <input type="checkbox"/> Sore       | <input type="checkbox"/> Dizzy     | <input type="checkbox"/> Hot        |
| <input type="checkbox"/> Sharp pain | <input type="checkbox"/> Bubbly    | <input type="checkbox"/> Empty      |
| <input type="checkbox"/> Twitchy    | <input type="checkbox"/> Tingling  | <input type="checkbox"/> Sweaty     |
| <input type="checkbox"/> Nervy      | <input type="checkbox"/> Itchy     | <input type="checkbox"/> Prickly    |
| <input type="checkbox"/> Sensitive  | <input type="checkbox"/> Congested | <input type="checkbox"/> Suffocated |
| <input type="checkbox"/> Tender     | <input type="checkbox"/> Foggy     | <input type="checkbox"/> Lite       |
| <input type="checkbox"/> Airy       | OTHER: _____                       |                                     |

Imagine that the sensation has a **colour** and name it:

- |                                 |                                 |                                |
|---------------------------------|---------------------------------|--------------------------------|
| <input type="checkbox"/> None   | <input type="checkbox"/> Green  | <input type="checkbox"/> Pink  |
| <input type="checkbox"/> Red    | <input type="checkbox"/> Blue   | <input type="checkbox"/> Black |
| <input type="checkbox"/> Orange | <input type="checkbox"/> Purple | <input type="checkbox"/> White |
| <input type="checkbox"/> Yellow | OTHER: _____                    |                                |


Imagine that the sensation has a **shape** and name it:

- |                               |                               |                                  |
|-------------------------------|-------------------------------|----------------------------------|
| <input type="checkbox"/> Cone | <input type="checkbox"/> Ball | <input type="checkbox"/> Star    |
| <input type="checkbox"/> Cube | <input type="checkbox"/> Blob | <input type="checkbox"/> Pyramid |
|                               | OTHER: _____                  |                                  |

Imagine that the sensation has an **action** and name it:

- |                                    |                                    |                                   |
|------------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Nothing   | <input type="checkbox"/> Growing   | <input type="checkbox"/> Twisting |
| <input type="checkbox"/> Throbbing | <input type="checkbox"/> Shrinking | <input type="checkbox"/> Turning  |
| <input type="checkbox"/> Pulsing   | <input type="checkbox"/> Moving    | <input type="checkbox"/> Bouncing |
|                                    | OTHER: _____                       |                                   |

I feel:

- |   |   |   |   |
|---|---|---|---|
|  |  |  |  |
| glad <input type="checkbox"/>   | mad <input type="checkbox"/>  | sad <input type="checkbox"/>  | anxious <input type="checkbox"/>  |

How strong is this emotion?

- 1    2    3    4    5    6    7    8    9    10