

## Body Oriented Psychotherapy Record Form

Date: \_\_\_\_\_ Session Number: \_\_\_\_\_ Therapist: \_\_\_\_\_

### Events in each of 5 part session:

<b><u>1. Opening Circle</u></b>	
<b><u>2. Warm up:</u></b>	
<b><u>3. Structured tasks:</u></b>	
<b><u>4. Creative Play:</u></b>	
<b><u>5. Closing circle:</u></b>	



**Group process observations:**

<p><b><u>General Evaluation:</u></b></p> <p>Including energy levels (high, normal, low) , group process/dynamics (e.g. splitting, fragmented, confrontational, withdrawn, unified, challenging), overall feeling of how session progressed, level of openness/cooperation in patients, level of trust, and any other subtle features/shifts, level of engagement</p>	
<p><b><u>Predominant Body experiences</u></b> (subjectively reported and objectively observed)</p>	
<p><b><u>Predominant Movement themes</u></b></p> <p>Predominant efforts:</p> <p>Use of space:</p>	
<p><b><u>Predominant Psychological themes:</u></b></p> <p>What themes are evoked, e.g. dependency, withdrawal, destructiveness, enthusiasm, compliance, passivity etc</p>	
<p><b><u>Interrelational:</u></b></p> <p>Transference and counter-transference feelings</p>	

Plan for following session: (Events related to 5 parts):

1.

2.

3.

4.

5.