

# 10

## Medical Phobias Clinical Practice Workbook

A clinically branded, function-preserving edition retaining the original exercises, psychoeducation, checklists, logs, planning tools, and response space.

DSM-5-TR · ICD-11 CLINICAL ALIGNMENT

1 · Identifying Your Medical Phobia Triggers

2 · Exploring the Root Causes of Medical Phobia

3 · Relaxation Techniques

4 · Understanding Medical Procedures

5 · Identifying Negative Thought Patterns

6 · Exposure Therapy

7 · Imaginal Exposure

8 · Building Trust with Medical Professionals

9 · Creating a Support Network

10 · Self-Compassion and Self-Care

# How to use this workbook

- Use this workbook selectively and collaboratively; it is educational and does not replace individualized assessment, diagnosis, treatment, medical care, or crisis services.
- Skip, pause, or modify any activity that increases distress, danger, shame, or loss of functioning. Adapt language for culture, disability, neurodivergence, health, resources, and lived context.
- Ratings in this workbook are reflection tools unless a named, validated measure and interpretation are explicitly provided.

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## Identifying Your Medical Phobia Triggers

A trigger is anything that sets off your anxiety or fear response. Triggers can be external (situations, objects, people) or internal (thoughts, memories, physical sensations).

1. Think about the last few times you experienced intense anxiety or fear related to medical situations. What were you doing? Where were you? Who were you with?

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2. Write down specific situations, objects, or thoughts that you believe trigger your medical phobia.

*Example: Seeing a needle, hearing someone talk about surgery, the smell of a hospital.*

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3. For each trigger listed, describe how you typically react.

*Example: Heart races, palms sweat, feel the urge to leave the room.*

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4. Identify coping strategies you can use when confronted with a trigger. The following are some suggestions. Check off the ones that may be helpful or add more to the list:

- ☐ **Diaphragmatic Breathing:** Breathe deeply into your diaphragm, ensuring your stomach rises and falls with each breath.
- ☐ **Sensory Focus:** Focus on a specific object in the room and describe it in detail to distract your mind.
- ☐ **Quick Progressive Muscle Relaxation:** Focus on tensing and relaxing one major muscle group, such as your shoulders or hands, for a quick relaxation effect.
- ☐ **Safe Place Visualization:** Imagine a safe and relaxing place where you feel completely at ease, focusing on the sensory details.
- ☐ **Positive Outcome Visualization:** Visualize a successful and calm medical appointment, focusing on positive outcomes and feelings.
- ☐ **Positive Self-Talk:** Use affirmations to reassure yourself, such as "I am safe," "I can handle this," and "I am in control."
- ☐ **Engage in a Hobby:** Bring a book, puzzle, or knitting project to distract yourself while waiting.
- ☐ **Listen to Podcasts:** Create a playlist of interesting podcasts to listen to during medical situations.
- ☐ **Play a Game:** Use a mobile game to keep your mind occupied.
- ☐ **Exercise:** Engage in light exercise, such as walking or stretching, before the appointment to release tension and increase endorphins.
- ☐ **Use a Stress Ball:** Squeeze a stress ball to release physical tension and provide a distraction.
- ☐ **Create a Comfort Kit:** Bring items that make you feel comfortable, such as a favorite blanket, or a comforting object.
- ☐ \_\_\_\_\_

## Exploring the Root Causes of Medical Phobia

1. Think about significant medical experiences from your past. These can be positive, neutral, or negative.

*Example: "I had a painful experience getting stitches as a child."*

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2. Identify emotions associated with medical situations. Are there specific feelings that arise?

*Example: "I feel a sense of dread when I think about hospitals."*

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3. Reflect on your family's attitudes towards doctors and medical procedures. Did your family members express fear or anxiety?

*Example: "My mother always expressed fear of doctors, which influenced me."*

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4. Consider how cultural beliefs and practices might have shaped your view of healthcare.

*Example: "In my culture, there's a distrust of medical professionals."*

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5. Reflect on any negative outcomes from medical procedures or treatments.

*Example: "A medication caused severe side effects, making me wary of doctors."*

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6. Explore if your medical phobia is part of a broader pattern of anxiety or other phobias.

*Example: "I also have a fear of needles and blood."*

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7. Assess your overall anxiety levels. Do you generally feel anxious in other areas of your life?

*Example: "I tend to feel anxious in unfamiliar situations, not just medical ones."*

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8. Note any behaviors you engage in to avoid medical situations.

*Example: "I avoid scheduling doctor's appointments unless absolutely necessary."*

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9. Consider how these avoidance behaviors impact your daily life and health.

*Example: "I miss regular check-ups, which affects my overall health."*

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10. Have you sought professional help for your medical phobia? If so, what was your experience?

*Example: "I saw a therapist, which helped me understand my phobia better."*

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## Relaxation Techniques

Practicing relaxation techniques can help you manage the physical and emotional symptoms of medical phobia, making medical situations less overwhelming.

### 1. Deep Breathing Exercises

- Find a comfortable, quiet place to sit or lie down.
- Close your eyes and take a deep breath in through your nose, counting to four.
- Hold your breath for a count of four.
- Exhale slowly through your mouth, counting to six.

Repeat this process for 5-10 minutes.

Did you notice any changes in your anxiety levels?

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### 2. Progressive Muscle Relaxation

PMR involves tensing and then relaxing different muscle groups to release tension.

- Find a comfortable, quiet place to sit or lie down.
- Starting with your feet, tense the muscles as tightly as you can for a count of five.
- Release the tension and notice the sensation of relaxation.
- Move up to your calves, thighs, abdomen, chest, arms, and face, repeating the process for each muscle group.

Did you notice any changes in your anxiety levels?

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### **3. Guided Imagery**

- Find a comfortable, quiet place to sit or lie down.
- Close your eyes and take a few deep breaths to relax.
- Imagine a peaceful place, such as a beach or forest.
- Focus on the details of the scene: the sounds, smells, and sensations.

Spend 10-15 minutes visualizing this scene.

Did you notice any changes in your anxiety levels?

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### **4. Mindfulness Meditation**

Mindfulness meditation involves focusing on the present moment without judgment.

- Find a comfortable, quiet place to sit.
- Close your eyes and take a few deep breaths.
- Focus on your breath, noticing the sensation of each inhale and exhale.
- When your mind wanders, gently bring your focus back to your breath.

Practice for 5-10 minutes initially, gradually increasing the time.

Did you notice any changes in your anxiety levels?

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## **5. Self-Massage**

- Find a comfortable place to sit or lie down.
- Use your hands to gently massage areas of tension, such as your shoulders, neck, and temples.
- Apply gentle pressure and use circular motions.

Spend 5-10 minutes on each area.

Did you notice any changes in your anxiety levels?

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Experiment with combining different techniques to find what works best for you.

## Understanding Medical Procedures

1. Write down specific medical procedures that cause you anxiety.

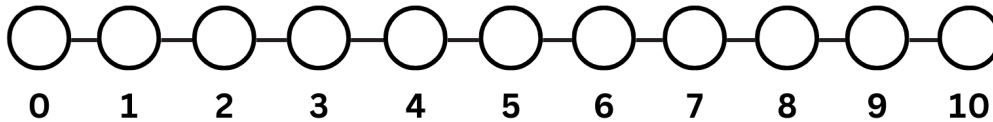
*Example: "Blood tests."*

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2. Use a scale from 0 to 10 to rate the intensity of anxiety each procedure causes.



3. Research each procedure to understand what it involves. Use reliable sources such as medical websites, books, or ask healthcare professionals.

*Example: "I will read about blood tests on a trusted medical website."*

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4. Break down each procedure into its individual steps to understand the process better.

*Example: "Blood test steps: 1. Registration, 2. Sitting in the chair, 3. Cleaning the area, 4. Inserting the needle, 5. Drawing blood, 6. Removing the needle, 7. Applying a bandage."*

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5. Understand the purpose of each procedure and why it is necessary.

*Example: "Blood tests help diagnose and monitor health conditions by checking levels of various substances in the blood."*

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6. Learn about and describe the physical sensations you might experience during each procedure.

*Example: "During a blood test, I might feel a brief pinch when the needle is inserted and slight pressure while blood is drawn."*

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7. Reflect on and prepare for possible emotional reactions during the procedure.

*Example: "I might feel anxious or nervous, but I can use deep breathing to stay calm."*

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8. Visualize the procedure step-by-step to familiarize yourself with the experience.

*Example: "I will visualize the entire blood test process, imagining myself staying calm and relaxed."*

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9. Write down any questions you have about the procedures to ask your healthcare providers.

*Example: "What can I expect during the blood test? How long will it take?"*

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10. Discuss any concerns or fears you have with your healthcare provider.

*Example: "I'm very anxious about needles. Are there any ways to make the blood test more comfortable?"*

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11. Plan your day to minimize stress and ensure you have enough time for the procedure without rushing.

*Example: "I will schedule the blood test for a day when I don't have other stressful commitments."*

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12. Bring items that can help you stay calm and comfortable during the procedure.

*Example: "I will bring my favorite book or listen to calming music while waiting."*

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13. Practice relaxation techniques before and during the procedure to manage anxiety.

*Example: "I will practice deep breathing exercises while waiting for my turn."*

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14. After the procedure, reflect on the experience and how it compared to your expectations.

*Example: "The blood test was quicker and less painful than I expected. I felt proud of myself for staying calm."*

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15. Write down your thoughts and feelings about the procedure.

*Example: "I felt anxious at first, but the nurse was very kind, which helped me relax."*

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16. Identify any lessons learned from the experience that can help you in the future.

*Example: "I learned that using deep breathing really helps manage my anxiety. I will continue practicing this technique."*

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## Identifying Negative Thought Patterns

1. Write down common negative thoughts you have about medical situations.

*Example: "I always think something will go wrong during my appointment."*

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2. Identify specific situations that trigger your negative thoughts.

*Example: "When I see a doctor's office or hear medical terminology."*

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3. Reflect on how these negative thoughts make you feel emotionally.

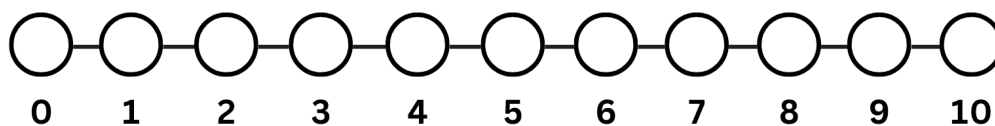
*Example: "I feel anxious, scared, and overwhelmed."*

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4. Use a scale from 0 to 10 to rate the intensity of your negative thoughts.



5. Identify factors that influence your negative thoughts, such as media, stories from others, or previous medical experiences.

*Example: "Hearing stories from others about medical complications."*

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6. Challenge the validity of your negative thoughts by asking yourself questions.

Negative Thought: \_\_\_\_\_

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*Example: "I will faint if I see a needle."*

- What is the evidence for this thought?

*Example: "I felt dizzy the last time I had a blood test."*

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- What is the evidence against this thought?

*Example: "I didn't actually faint, and the nurse helped me stay calm."*

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- Is there an alternative explanation?

*Example: "I might have felt dizzy because I was anxious, not because I was going to faint."*

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- What is the worst that could happen?

*Example: "The worst that could happen is that I might feel faint, but the medical staff will help me."*

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- What is the best that could happen?

*Example: "The best that could happen is that I stay calm and the procedure goes smoothly."*

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- What is the most realistic outcome?

*Example: "The most realistic outcome is that I might feel a bit anxious, but I will get through the procedure without fainting."*

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- What would I say to a friend who has this thought?

*Example: "I would tell my friend that it's normal to feel anxious, but they are stronger than they think and will be okay."*

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- How will I feel about this situation in a week, month, or year?

*Example: "In a week, I might still feel anxious, but in a month, I will likely feel more confident, and in a year, I will barely remember this anxiety."*

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Use a thought record to document and reframe negative thoughts.

| Negative Thought | Evidence For | Evidence Against | Alternative Thought |
|------------------|--------------|------------------|---------------------|
|                  |              |                  |                     |

| Negative Thought | Evidence For | Evidence Against | Alternative Thought |
|------------------|--------------|------------------|---------------------|
|                  |              |                  |                     |

## Exposure Therapy

Exposure therapy involves facing your fears in a controlled and systematic way, starting with less anxiety-provoking situations and gradually progressing to more challenging ones. The goal is to reduce fear and anxiety associated with medical situations by learning that these situations are not as dangerous as they seem.

1. Write down specific medical situations that cause you fear or anxiety. Use a scale from 0 to 10 to rate the intensity of fear or anxiety each situation causes.

*Example:*

- *"Seeing a needle: 8/10."*
- *"Visiting a doctor's office: 7/10."*
- *"Hearing medical terminology: 5/10."*

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2. An exposure hierarchy is a list of feared situations ranked from least to most anxiety-provoking. Organize your list of fears from least to most intense.

*Example:*

- *"Hearing medical terminology: 5/10."*
- *"Visiting a doctor's office: 7/10."*
- *"Seeing a needle: 8/10."*

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3. Break down each fear into smaller, manageable steps.

*Example: "Hearing medical terminology":*

- *Reading medical terms online (4/10).*
- *Watching a video about medical procedures (6/10).*

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4. Begin with the least anxiety-provoking situation on your hierarchy.

*Example: "Reading medical terms online."*

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5. Set specific, measurable goals for each exposure step.

*Example: "Read a list of medical terms for 10 minutes every day for a week."*

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6. Schedule regular exposure sessions, gradually increasing the time and intensity.

*Example: "Increase reading time to 20 minutes after the first week."*

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Once you feel comfortable with a less challenging step, move on to the next step in your hierarchy.

7. Identify and practice coping strategies to manage anxiety during exposure.

*Example: Deep breathing exercises.*

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8. Use positive affirmations and self-talk to encourage yourself.

*Example: "I can handle this. I am making progress."*

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9. Maintain a journal to track your progress, noting your reactions and feelings after each exposure session.

| Date                | Exposure Exercise                          | Reactions and feelings                             |
|---------------------|--------------------------------------------|----------------------------------------------------|
| <i>e.g., Monday</i> | <i>I read medical terms for 15 minutes</i> | <i>I felt anxious at first, but it got easier.</i> |

| Date | Exposure Exercise | Reactions and feelings |
|------|-------------------|------------------------|
|      |                   |                        |

## Imaginal Exposure

Imaginal exposure involves imagining a feared situation in detail to reduce anxiety over time. This technique can help you confront and process your fears in a safe environment, especially if direct exposure is too overwhelming or not possible.

1. Write down specific medical situations that cause you anxiety. Use a scale from 0 to 10 to rate the intensity of fear each situation causes.

*Example: "Getting a blood test: 8/10."*

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2. Arrange your fears from least to most anxiety-provoking.

*Example:*

- *Seeing a needle (6/10),*
- *Hearing medical terminology (7/10),*
- *Getting a blood test (8/10).*

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3. Preparing for Imaginal Exposure

- Find a quiet and comfortable place where you won't be disturbed.
- Allocate a specific amount of time for the imaginal exposure session.

- Have tools ready to help you relax before and after the session, such as a stress ball, calming music, or a blanket.
- Start with a relaxation technique to calm your mind and body.
- Close your eyes and vividly imagine the feared medical scenario in detail.
- Picture yourself in the medical setting.
- Imagine the sights, sounds, smells, and sensations.
- Imagine each step of the procedure or situation.
- Stay with the image, even if you feel anxious, for the duration of the session.
- Allow yourself to experience the anxiety without trying to push it away.
- Use coping strategies to manage anxiety during the session.

4. After the session, reflect on your feelings and reactions.

*Example: "I felt very anxious at first, but my anxiety decreased after a few minutes of imagining the scenario."*

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5. Rate your anxiety level at the beginning and end of the session.

*Example: "Start: 8/10, End: 5/10."*

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6. Write down any insights or observations you had during the session.

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Repeat the imaginal exposure session regularly until your anxiety decreases.

Once you feel comfortable with one scenario, move on to the next fear on your list.

## Building Trust with Medical Professionals

1. Consider past experiences with medical professionals that have affected your trust.

*Example: "I had a negative experience with a doctor who dismissed my concerns."*

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2. Identify any current barriers to trusting medical professionals.

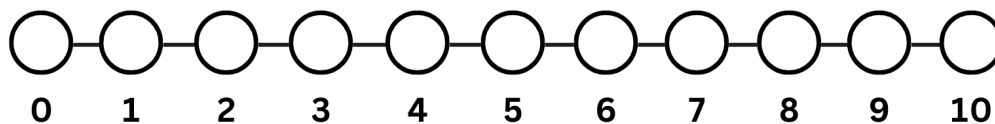
*Example: "I fear being judged or not taken seriously."*

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3. Use a scale from 0 to 10 to rate your current level of trust in medical professionals.



4. Prepare to communicate your needs and concerns clearly to your healthcare provider.

*Example: "I will write down my symptoms and concerns before the appointment."*

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5. Look for a healthcare provider with whom you feel comfortable and respected.

*Example: "I will read reviews and ask for recommendations to find a doctor who is known for being compassionate and understanding."*

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6. After the appointment, evaluate how comfortable and respected you felt.

*Example: "I felt listened to and understood by the doctor, which helps build my trust."*

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7. Clearly define your boundaries and what you are comfortable with during medical appointments.

*Example: "I prefer to be informed before any physical examination starts."*

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8. Request any accommodations you need to feel more comfortable.

*Example: "Can I have a support person with me during the appointment?"*

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9. Make any necessary adjustments to your approach or communication to enhance trust.

*Example: "I will continue to prepare questions before my appointments to ensure all my concerns are addressed."*

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10. Schedule regular check-ins with your healthcare provider to maintain and build trust.

*Example: "I will schedule follow-up appointments to discuss my progress and any new concerns."*

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## Creating a Support Network

1. Think about what kind of support you need to manage your medical phobia.

*Example: "I need someone to accompany me to medical appointments."*

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2. Identify people in your life who you trust and feel comfortable with.

*Example: "My partner, best friend, and a supportive coworker."*

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3. Consider the availability and willingness of these individuals to provide support.

*Example: "My partner is available and willing to accompany me to appointments."*

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4. Rank the individuals based on who you think would be the most supportive.

*Example: "1. My partner, 2. Best friend, 3. Supportive coworker."*

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5. Think about how to communicate your needs clearly and openly.

*Example: "I will explain my medical phobia and why I need support."*

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6. Discuss and set boundaries to ensure mutual respect and comfort.

*Example: "I will ensure my friend knows she can set limits if she feels overwhelmed."*

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7. Identify professionals who can provide additional support, such as therapists, counselors, or support groups.

*Example: "I will join an online support group for people with medical phobia."*

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## Self-Compassion and Self-Care

Self-compassion involves treating yourself with kindness, understanding, and acceptance, especially during difficult times.

### 1. Positive Self-Talk

Replace negative self-talk with positive and compassionate statements.

*Example: Instead of saying, "I'm so weak for being afraid," say, "It's okay to feel afraid, and I am taking steps to manage it."*

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### 2. Self-Compassion Break

Take a moment to acknowledge your feelings and respond with kindness.

Acknowledge: Recognize and accept your feelings. ("This is a moment of suffering.")

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Common Humanity: Remember that you are not alone. ("Others experience this too.")

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Kindness: Offer yourself kindness and understanding. ("May I be kind to myself.")

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### **3. Journaling for Self-Compassion**

Write a letter to yourself from the perspective of a compassionate friend.

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### **4. Practicing Self-Compassion During Medical Situations**

Before Medical Situations: Use self-care strategies to prepare for medical situations.

*Example: "Before my appointment, I will take a few minutes to practice deep breathing and positive self-talk."*

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During Medical Situations: Apply self-compassion techniques during medical situations to reduce anxiety.

*Example: "During the appointment, I will remind myself that it's okay to feel scared and that I am brave for being there."*

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After Medical Situations: Use self-care practices to recover and reflect after medical situations.

*Example: "After the appointment, I will take a relaxing bath and write about my experience in my journal."*

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# 2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

## Classification status

- DSM-5-TR: Specific phobia · Formal diagnosis when threshold is met; subtype may describe the stimulus.
- ICD-11 CDDR: 6B03 Specific phobia · Formal diagnosis.
- This workbook is non-diagnostic. A title, checklist, or completed activity never establishes a diagnosis.

## Pages requiring the updated interpretation

- The audit identified source pages 1, 2, 3, 5, 6, 7, 8, 9, 12, 13, 14, 15, 16, 17, 19, 22, 23, 24, 25, 26, 27, 28, 29, 30. The statements below supersede incompatible diagnostic, scoring, safety, or resource wording on those pages.

## Diagnostic and differential limits

- Confirm persistent, excessive fear with avoidance/endurance and impairment; exclude medical danger, trauma-related disorders, OCD, panic/agoraphobia, illness anxiety, and culturally proportionate fear.

## Document-specific corrections

- Pages [1, 2, 3, 6, 9, 13] · Frame ·Medical Phobias· using the DSM/ICD status below; add duration, impairment, exclusions, and differentials without reproducing criteria. The title alone must never be treated as a diagnosis.
- Pages [1, 2, 12, 17, 22, 26, 27, 29] · Treat the Medical Phobias ratings/checklists as author-created reflection tools only. Remove unsupported severity bands, cutoffs, totals, or language suggesting diagnostic validity; label response anchors and recall period explicitly.
- Pages [1, 3, 22, 26, 28] · Exposure should follow an individualized hierarchy with informed consent, repeated learning-focused practice, response-prevention guidance, and screening for medical danger, trauma cues, dissociation, fainting risk, panic-related medical mimics, and substance effects; avoid reassurance that guarantees safety. Apply this specifically to the workbook's Identifying Your Medical Phobia Triggers, Exploring the Root Causes of Medical Phobia, Relaxation Techniques, Understanding Medical Procedures sections.
- Pages [1, 3, 5, 6, 7, 8, 9, 12, 13, 14, 15, 16, 17, 19, 22, 23, 24, 25, 27, 29, 30] · Review all medical assertions in Medical Phobias with a qualified medical professional; distinguish psychoeducation from individualized advice and add referral thresholds, contraindications, and medication/procedure cautions appropriate to this population.

## Measures, scoring, and permissions

- Treat the Medical Phobias ratings/checklists as author-created reflection tools only. Remove unsupported severity bands, cutoffs, totals, or language suggesting diagnostic validity; label response anchors and recall period explicitly. custom/unvalidated unless evidence is supplied confirm no third-party item wording was adapted

## Intervention scope and contraindications

- Exposure should follow an individualized hierarchy with informed consent, repeated learning-focused practice, response-prevention guidance, and screening for medical danger, trauma cues, dissociation, fainting risk, panic-related medical mimics, and substance effects; avoid reassurance that guarantees safety.
- Exposure work should be formulation-driven, collaborative, graded, and designed to reduce avoidance and unhelpful safety behavior not delivered as forced flooding. Screen medical and trauma-related explanations when relevant.

## Crisis and current resources

- For immediate danger or a medical emergency, call 911 or go to the nearest emergency department. In the U.S., call or text 988 or use 988lifeline.org. Outside the U.S., use verified local emergency and crisis services. A workbook is not a crisis service or safety plan.

## Authoritative references

- <https://www.psychiatry.org/psychiatrists/practice/dsm/updates-to-dsm/updates-to-dsm-5-tr-criteria-text>

# 2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

- <https://icd.who.int/browse/2026-01/mms/en>
- [https://www.ptsd.va.gov/professional/treat/txessentials/prolonged\\_exposure\\_pro.asp](https://www.ptsd.va.gov/professional/treat/txessentials/prolonged_exposure_pro.asp)
- <https://www.who.int/publications/i/item/9789240077263>
- <https://988lifeline.org/>
- <https://www.nice.org.uk/guidance/cg113/chapter/recommendations>