# Panic experiment

Make a specific prediction and a fair test. Plan any safeguards before practice; record observations afterwards.

Editable PDF: replace or delete the fictional examples. Blank PDF: print and write. Guidance follows.

## BEFORE PRACTICE

### Question / prediction / belief 0-100%

e.g. If I stay in the queue, I will lose control. Belief 80%.

### Agreed task / habit to change

e.g. Queue for one item; reduce the agreed repeated check.

### Safety, support and review plan

e.g. Confirm suitability and the plan with my therapist. Keep necessary care.

## AFTER PRACTICE - observations and learning

### What happened / feelings / coping

e.g. Felt anxious, bought the item and left normally.

### Prediction and outcome / another explanation

e.g. The feared loss of control did not happen in this attempt.

### Learning / belief now / next step

e.g. Belief 55%. Review what to repeat or change with my therapist.

Plan with your therapist. Do not induce symptoms or change prescribed care on your own.


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# Using this resource

Panic experiment

## What this helps with

Panic treatment can include experiments that test feared outcomes and help change the meanings attached to sensations. A good experiment has a specific question and a way to observe the answer. It is not a test of how much distress you can endure. This sheet supports planning and review after assessment; it does not prescribe a task. Keep the experiment relevant to the pattern you are working on and manageable enough to generate useful learning.

## How to use it

1. Agree the question, a specific prediction and belief rating from 0-100%.
2. Choose the situation, one response to change and necessary safeguards. Confirm suitability with your therapist.
3. Decide what you will observe and when you will review it; avoid continuous body scanning.
4. Complete the agreed task, compare outcomes with the prediction and consider alternative explanations. Plan the next step.

## A fictional worked example

With her therapist, Ella plans to wait in a familiar café queue rather than repeatedly checking her pulse. Her prediction is, "If my heart races and I do not check, I will collapse," at 85%. Medical considerations have already been reviewed. She agrees to notice what happens while choosing her drink and ordering, without using a new mental reassurance routine. She feels anxious and remains able to order; no collapse occurs. They review the remaining doubt that the task was too easy and decide what a useful next test would be. They do not treat one result as proof about all future physical symptoms.

## Keep in mind

Use only a task individually agreed as appropriate. Exercises deliberately changing breathing, balance or bodily sensations need professional assessment and supervision; this sheet gives no induction instructions. Do not experiment in hazardous settings or change medication. Stop and seek help if a genuine medical or safety concern arises.

## Sources and attribution

Clark, D. M. (1986). A cognitive approach to panic. Behaviour Research and Therapy, 24(4), 461-470.

NICE (2011, updated 2020). Generalised anxiety disorder and panic disorder in adults: management (CG113).

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