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Nightmare Rescripting Sheet

Prepare one changed dream, in as little detail as you want, for a clinician-supported plan. This sheet does not ask for a trauma account, replace trauma treatment, or direct a medicine change.

Stopping is always allowed. If distress rises, keeps rising, or you start to feel disconnected from yourself, stop and contact your treating clinician. For thoughts of self-harm or a mental-health crisis in the United States, call or text 988. For immediate danger, a serious injury, acting out a dream, or a possible seizure, use emergency care or call 911.

1 Choose how much detail you want to use

All three are complete answers. You do not need to describe trauma to use this sheet.

☐ Skip the original dream entirely ☐ A few neutral words ☐ A short outline, nothing graphic

2 The one moment you want to change

In neutral words. One change point is enough — this is not a rewrite of the whole night.

3 The new version

Write it in the present tense. It can be safer, more within your control, or simply less distressing. It does not have to be realistic, and it does not have to be cheerful.

Entered by the clinician

4 How often, and for how long, if this is approved

Practice plan

5 The signs that should stop it

On a hard day. Skip the original dream. Write one neutral change you would want. Or stop, and bring the blank sheet to your next visit — that is also useful.

Education, not medical advice. Evidence and U.S. guidance checked through September 8, 2026. If you are in crisis, call or text 988 or use the 988 Lifeline chat. For an immediate threat to life or a medical emergency, call 911. Outside the United States, use your local crisis or emergency service.

This worksheet accompanies the essay *The Same Dream, Again: Treating Nightmares*. Clinical review: Fady Boules, PMHNP-BC.

Record only what happened. No amount of practice is implied by the number of rows. Stop if the page itself increases distress, or if anything on the first page applies.

Date	Did a nightmare occur?	A brief note on distress	Practice, only if the clinician approved it	Stopped, or help used

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