

RELAPSE PREVENTION CHECKLIST

NAME	DATE	
IDENTIFY PERSONAL TRIGGERS	CHECK	COMMENT
LIST YOUR TRIGGERS (PEOPLE, PLACES, SITUATIONS)		
RECOGNIZE EARLY WARNING SIGNS OF RELAPSE		
DEVELOP COPING STRATEGIES	CHECK	COMMENT
USE DISTRACTION TECHNIQUES (E.G., HOBBIES, EXERCISE)		
PRACTICE MINDFULNESS AND RELAXATION EXERCISES		
REACH OUT TO YOUR SUPPORT NETWORK		
EMERGENCY CONTACT LIST	CHECK	COMMENT
SPONSOR:		
THERAPIST:		
TRUSTED FRIENDS/FAMILY:		

PLAN FOR HIGH-RISK SITUATIONS	CHECK	COMMENT
PLAN STRATEGIES FOR DEALING WITH HOLIDAYS AND SOCIAL EVENTS		
AVOID HIGH-RISK PLACES AND SITUATIONS		
MOTIVATIONAL REMINDERS	CHECK	COMMENT
LIST REASONS FOR STAYING SOBER		
KEEP MOTIVATIONAL QUOTES AND AFFIRMATIONS VISIBLE		
REGULAR REVIEW	CHECK	COMMENT
REVIEW AND UPDATE YOUR RELAPSE PREVENTION PLAN REGULARLY		
ATTEND SUPPORT GROUP MEETINGS REGULARLY		
SELF-CARE AND STRESS MANAGEMENT	CHECK	COMMENT
PRACTICE SELF-CARE ACTIVITIES		
USE STRESS MANAGEMENT TECHNIQUES		