

LENS Neurofeedback Weekly Progress Tracker

Instructions: Over the next week, check off any changes you notice in the areas below. You can add notes next to each item to describe specific changes in detail.

Name: _____

Date: _____

Mental Health

1. ☐ Reduced anxiety or worry
2. ☐ Improved emotional regulation (e.g., managing anger, sadness, frustration)
3. ☐ Decreased feelings of overwhelm or stress
4. ☐ Fewer negative or intrusive thoughts
5. ☐ Increased feelings of confidence or self-worth
6. ☐ Improved ability to cope with challenging emotions
7. ☐ Reduced symptoms of depression or sadness

Sleep Habits

8. ☐ Easier time falling asleep
9. ☐ Sleeping through the night with fewer interruptions
10. ☐ Waking up feeling rested and refreshed
11. ☐ Improved consistency in sleep patterns (e.g., going to bed and waking up at the same time)
12. ☐ Fewer nightmares or disruptive dreams
13. ☐ Feeling less tired or fatigued during the day
14. ☐ Better quality of sleep overall

Social Interactions

15. ☐ Feeling more comfortable in social settings
16. ☐ Improved interactions with family members
17. ☐ Increased participation in group activities or events
18. ☐ More willingness to engage in conversations
19. ☐ Feeling less isolated or withdrawn from others
20. ☐ Better ability to handle conflicts or disagreements
21. ☐ Greater sense of connection with friends or peers

Mood Changes

22. ☐ Fewer mood swings
23. ☐ Less irritability or frustration
24. ☐ More positive mood overall
25. ☐ Greater sense of calm or relaxation

- 26. ☐ Increased ability to manage stress
- 27. ☐ Improved motivation to participate in daily activities
- 28. ☐ Increased feelings of happiness or contentment

Executive Functioning Skills

- 29. ☐ Improved focus and concentration
- 30. ☐ Better memory and recall
- 31. ☐ Enhanced organization and planning skills
- 32. ☐ Easier time completing tasks or chores
- 33. ☐ More efficient problem-solving and decision-making
- 34. ☐ Reduced procrastination
- 35. ☐ Better time management throughout the day

Overall Well-Being

- 36. ☐ Increased energy levels
- 37. ☐ Fewer physical complaints (e.g., headaches, muscle tension)
- 38. ☐ Feeling more balanced emotionally and physically
- 39. ☐ Greater sense of peace or calm
- 40. ☐ Better ability to manage daily responsibilities
- 41. ☐ Improved motivation to pursue hobbies or interests
- 42. ☐ Greater satisfaction with overall well-being

Additional Notes:

This section can be used for any extra observations or details about your experiences: