FREE TOOL · 15 MINUTES

The First 90 Seconds

Your Panic Signature: recognise your personal pattern, understand what your body is doing, and have a plan ready before you need it.

A free tool from the book *The Anatomy of Panic: Stories, Science, and Healing from the Inside Out*

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Education and self-understanding, not medical treatment

BEFORE YOU BEGIN

Your panic has a shape. Learn it.

Panic attacks share common features, but the sensations that dominate, and the order they arrive in, tend to be individual. *The Anatomy of Panic* calls this your **panic signature**: the particular shape your nervous system's alarm takes.

People who look the most composed are often the ones carrying this most quietly. The book describes how hard it can be for "the strong, reliable ones" to say anything at all, because panic seems so at odds with who they are supposed to be. If that is you, this tool is a private place to start.

If you experience panic

- **Page 3:** read what is happening in your body, step by step.
- **Page 4:** map your own signature from one past episode.
- **Page 5:** write your First 90 Seconds plan and cut out the card.
- **Page 6:** decide whether, and how, to talk about it at work.

If you coach, treat or lead

- Use pages 3–5 as a shared language with a client or team member. Let them fill it in; your job is curiosity, not interpretation.
- Page 6 includes a short guide for managers and colleagues: what helps in the moment, and what quietly keeps panic going.

Why "the first 90 seconds"?

It is not a medical measurement. The book notes that a typical attack peaks within about ten minutes and resolves within twenty to thirty. The first minute or two is simply where you still have a choice: the moment your first signature sensation arrives and your mind starts telling a story about it. A plan you wrote in a calm moment is far easier to use than a plan you try to invent mid-alarm.

> **Please read.** This tool is for education and self-understanding. It is not medical or psychological diagnosis or treatment, and it does not replace one. If you have chest pain, fainting, new or changing symptoms, or a heart or other medical condition, see a doctor first, and talk to a qualified physician or licensed mental-health professional about diagnosis and treatment. If you are in crisis or thinking about harming yourself, contact your local emergency services now. In the US, call or text **988**; in the UK and Ireland, call Samaritans on **116 123**.

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BODY AND MIND

What is actually happening

The book describes the amygdala in panic as a fire alarm set to an extremely sensitive threshold: it does not tell a lion apart from a racing heartbeat. Here is the cascade it sets off, in plain terms.

1. **The alarm.** The amygdala flags a sensation as danger and, within seconds, adrenaline is released. You feel a jolt in the chest, a rush of heat, a racing heart.
2. **Heart and blood.** Blood is pushed to the big muscles and away from skin, gut and extremities: hence pale or clammy skin, tingling hands and feet, a churning stomach.
3. **Breath.** Faster breathing lowers carbon dioxide in the blood, which produces dizziness, light-headedness, tingling around the mouth and a sense of unreality. Uncomfortable, not dangerous.
4. **Muscles and senses.** Muscles brace for action, so you shake or feel weak when you stay seated in a meeting. Senses go into "high gain": the room feels louder and brighter.
5. **The thinking brain goes quiet.** Rational knowledge ("I have felt this before") is temporarily hard to reach. That is why reassurance in the moment helps less than you'd expect.
6. **The wave breaks.** The body cannot sustain this state. The "rest and digest" system steadily brings heart rate and breathing down. Tiredness or tears afterwards are normal.

The loop that keeps it going

Sensation → frightening interpretation → more fear → more sensation. The book draws on David Clark's cognitive model: what sustains panic is less the first sensation than what we make of it. Change the interpretation and the loop can loosen.

What a panic attack cannot do

The book is clear: in people with healthy hearts, a panic attack does not cause a heart attack, does not make you "go mad", and is not fatal. Fainting is very unlikely, because the body is doing the opposite of what causes a faint. Anyone with a cardiac or other medical condition should discuss symptoms with their doctor.

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WORKSHEET · ABOUT 7 MINUTES

Map your panic signature

Think back to one episode: ideally one that is not too recent and not too distressing to reflect on. Do this in a calm moment, never during an attack. There are no right or wrong answers.

1. What did you notice first? Tick it, then number the others in the order they came.

- ☐ Heart racing or pounding
- ☐ Breathlessness
- ☐ Chest tightness
- ☐ Dizziness, light-headed
- ☐ Tingling or numbness
- ☐ Heat or chills
- ☐ Shaking, weak legs
- ☐ Nausea, churning gut
- ☐ Feeling unreal or detached
- ☐ Sweating
- ☐ Room too loud or bright
- ☐ Other: _____

2. What were you doing, and where were you?

3. In the moment vs. what I now understand

Use page 3 for the right-hand column, e.g. "my heart was racing: I thought heart attack" → "adrenaline preparing my body for action".

Sensation	What I believed it meant	What it is, physiologically

4. What did you do?

Left? Sought reassurance? Held still? Kept talking?

5. How long, from peak to easing?

An estimate is fine.

6. My signature in one line

"Mine usually starts with _____, then _____, and my mind says _____."

Repeat this for other episodes over time. The book suggests you will start to see consistent patterns, and that the gap between the feared meaning and the physiological reality becomes something you can draw on in the moment.

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YOUR PLAN · ABOUT 5 MINUTES

Your first 90 seconds

Four moves, in this order. The book's advice is to steady the body first: thinking becomes easier once arousal starts to drop. Practise them on calm days so they are familiar when you need them.

0–15 SECONDS

Notice and name it

Pause. Name what is happening, plainly: "This is my signature. This is adrenaline." The book's STOP practice works here: **S**top, **T**ake a breath, **O**bserve thoughts, feelings and body, **P**roceed on purpose. The aim is a gap between sensation and story.

15–45 SECONDS

Body first: lengthen the out-breath

Breathe in for 4, out for 6. Precision does not matter; just make the exhale longer than the inhale. If focusing on breath makes it worse, switch to the ground: press your feet into the floor, slowly look around the room and let your eyes rest on objects.

45–75 SECONDS

Say your statement

Use a sentence you wrote in advance and believe, at least partly. It should be accurate, not falsely positive. The book's examples include: "This is a panic attack. It is uncomfortable and frightening, but it is not dangerous. It will pass."

75–90 SECONDS

Stay if you can, and let it peak

Leaving teaches the brain the place was dangerous; staying teaches it otherwise. You do not have to fight the sensations. One person in the book noticed they began to soften after about thirty seconds of no longer resisting them.

✂ - - - - cut out and keep in your wallet or phone case - - - -

My First 90 Seconds

My signature starts with: _____

When I notice it, I say: _____

My body move: _____

My statement: _____

If I need someone: _____

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TALKING ABOUT IT AT WORK

Silence is expensive. Choose what you share.

The book names the choice plainly: disclose, with the vulnerability that brings, or manage in silence, which is exhausting and often unsustainable. There is no single right answer. These prompts help you choose on purpose.

If it's you

Who, if anyone? One trusted person is enough to start.

What do I actually need? e.g. a minute to step out, notice before a big presentation, nothing at all.

A short version: "I want to let you know I sometimes get panic attacks. They are uncomfortable but not dangerous, and they pass. If I step out for a few minutes, the most helpful thing is _____. I'll come back when I'm ready."

Even shorter: "I'm fine, I just need two minutes. Carry on without me."

Share only what you choose to. Check your organisation's policies or an HR adviser if you want formal adjustments.

If you lead, coach or work alongside

In the moment

- Stay calm, keep it quiet, offer a private space and water.
- Ask, don't assume: "Do you want me to stay or give you space?"
- Keep words few. In the alarm state, reassurance lands less than presence.
- If there is any doubt about a medical emergency, get help.

Afterwards

- Return to normal and keep it confidential.
- Ask what helps, what doesn't, and what they'd like you to notice.
- Be careful with permanent work-arounds. The book shows how loving accommodation can unintentionally maintain avoidance. Agree how to step back gradually.
- Encourage professional support. You are not their therapist.

> *"Panic disorder is not a character flaw. It is not a sign of weakness, instability, or inadequacy."*
>
> The Anatomy of Panic, Daniela Aneva

WHERE TO GO NEXT

Go deeper, at the pace that suits you

Read the book

The Anatomy of Panic: Stories, Science, and Healing from the Inside Out follows twenty stories of recovery across twenty chapters, with 36 practical tools, a 12-worksheet Workbook Appendix, eight evidence-based pathways and a chapter written for partners and families. The signature, physiology map, breathing and coping-statement tools on these pages come from its opening chapters.

Join a free open house: The Anatomy of Panic

Bring your signature. Meet Daniela, ask your questions and see whether the certification fits you.

Thu 29 Oct · 11:00 AM ET **Thu 19 Nov · 5:00 AM ET**

Reserve your place: **https://danielaaneva.com/open-houses/**

The Anatomy of Panic: certification for coaches, therapists and leaders

- Starts **Tue 8 Dec**, Tuesdays 12:00–4:00 PM ET · 10 live sessions (40 hours)
- **$1,950** · early bird **$1,750 until 17 Nov** · or 3 payments of $690
- For practitioners and leaders who want to recognise panic, respond well and know when to refer on

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Daniela Aneva · ICF Master Certified Coach (MCC), ACTC · EMCC EIA Master Practitioner. Author of *The Anatomy of Panic* and *Schemas in Leadership*.

This resource offers coaching-based education and self-understanding. It is not medical or psychological treatment. For diagnosis and treatment, please consult a qualified physician or licensed mental-health professional.