



Welcome to Day 6!

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Day 6: Today We Will Cover


01	02
Phase 8 Reevaluation Review the reevaluation process	Treatment Plan Review Completing & sequencing targets
03	04
Present Triggers Identification and processing	Future Template Desired state & future protocol
05	06
Legal & Ethical Issues Scope of practice on the EMDR path	EMD / Recent Restricted Narrow-focus processing strategies

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CHAPTER 1

Phase 8: Reevaluation Review

A deep dive into how and why we revisit progress at the start of every session.



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PHASE 8

Reevaluation is Natural

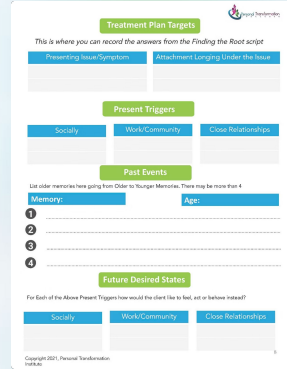
We do this at the beginning of every session — checking in to see what has shifted, what remains, and where to go next.

Reevaluation is not a separate event. It is a built-in, ongoing clinical habit.

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Treatment Plan Targets

Use this worksheet to record answers from the *Finding the Root* script – including presenting issues, present triggers, past events, and future desired states.



Treatment Plan Targets
This is where you can record the answers from the *Finding the Root* script

Presenting Issue/Symptom: _____ Attachment Longing Under the Issue: _____

Present Triggers

Sociality: _____ Work/Community: _____ Close Relationships: _____

Past Events

List older memories from going from Older to Younger Memories. There may be more than 4

Memory: _____ Age: _____

1 _____
2 _____
3 _____
4 _____

Future Desired States

For Each of the Above Present Triggers how would the client like to feel, act or behave instead?

Sociality: _____ Work/Community: _____ Close Relationships: _____

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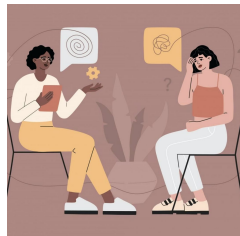


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PHASE 8

3 Types of

- 1 Previous Memory**
Check the target processed in the last session
- 2 Rest of Targets**
Review remaining memories on the treatment plan
- 3 Prior to Termination**
Final reevaluation before closing treatment



PHASE 8

Let's Find Out What Has Changed

Key reevaluation questions to open each session:

- "Is it still disturbing?"
- "Were other associated memories brought up?"
- "Were the present triggers more or less active?"

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PHASE 8 – IMPORTANT REMINDER

Ask About What's Happened Between Sessions

- Experiences**
What came up in daily life?
- More Processing**
Did the system continue working?
- Symptom Changes**
Shifts in behavior or reactivity
- Dreams & Insights**
New thoughts or overnight processing

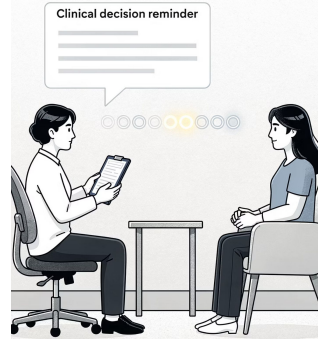
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PHASE 8 – IMPORTANT REMINDER

Sessions Can Be Incomplete

Sessions may end without full resolution during **Phase 4, 5, or 6**. This is normal – not a failure. The next session picks up where processing left off.

- Always return to the unfinished target before moving to anything new.



COMPLETING THE TREATMENT PLAN

Re-Accessing an Incomplete Target

If the target is incomplete, you are **restarting the session in Phase 4**.

- Use the *Script for Restarting Incomplete* – return to the original image, NC, and body sensation before resuming BLS.

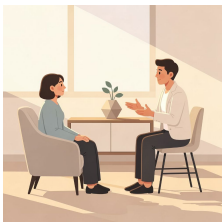


COMPLETING THE TREATMENT PLAN

Reprocess a New Target

If the previous target was **completely reprocessed**, move to the next memory in the treatment plan.

Begin with Phase 3 assessment of the new target and proceed through Phases 4–7.



COMPLETING THE TREATMENT PLAN

Moving to the Next Memory

Identify the **next chronological memory** that still carries a charge.

- Take a SUD to confirm activation
- Process through Phases 3–7
- Follow the treatment plan sequence





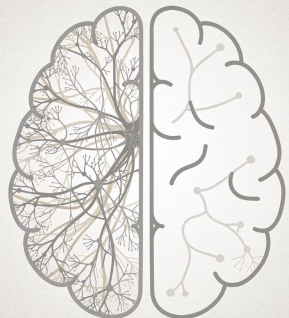
COMMON MISTAKE #1

Keep Your Eye on the Ball

Not asking about the presenting issue or symptoms that originally brought the client to treatment.

Always connect session progress back to the client's core presenting concerns — don't lose the thread.

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COMMON MISTAKE #2

The System Keeps Processing

Assuming the client's system has not processed anything since they left last time.

Processing can and does continue between sessions. Always check in — don't assume a static state.

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COMMON MISTAKE #3

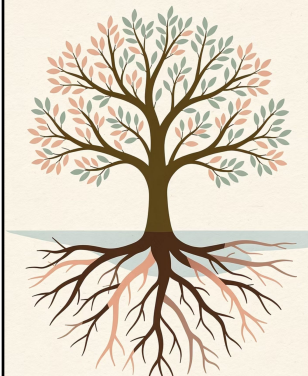
Don't Chase COWs

Crisis of the Week

It can be tempting to follow the client's most urgent presenting complaint — but **always return first** to check the target memory from the last session before pivoting.

- COW management is a skill. Acknowledge the crisis, then anchor back to the treatment plan.

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COMMON MISTAKE #4

Check the Whole Tree

"Sometimes the whole tree will fall down when we take out the roots."

After processing a core memory, check whether associated memories have also lost their charge — you may have done more than you realized.

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CHAPTER 2

Treatment Plan Review

Guiding principles for sequencing, selecting, and completing targets across the full course of treatment.

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TREATMENT PLAN

Chronological Order

Each event in the treatment plan should represent a **specific moment in time**.

Ideally processed in chronological order – oldest to most recent – though clinical judgment may call for exceptions.

One memory. One moment. One target at a time.

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TREATMENT PLAN

Selecting the Target Is a Clinical Decision

Target selection is never arbitrary. It requires clinical skill, attunement to the client, and awareness of the full treatment map.

- Consider emotional charge and readiness
- Consider client stability and window of tolerance
- Consult your supervisor when uncertain

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TREATMENT PLAN

Exceptions to All the Rules

There are valid clinical reasons to choose **EMD, Restricted**, or a **later chronological target** over standard sequencing.

Rules guide. Judgment decides. Always follow the client's clinical need.

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PRESENT TRIGGERS

What Is a Present Trigger?

A recent example of when the presenting issue has shown up in the client's current life.

Present triggers connect the past root memories to the client's lived experience today — they are the bridge between history and now.



PRESENT TRIGGERS

How to Process Present Triggers

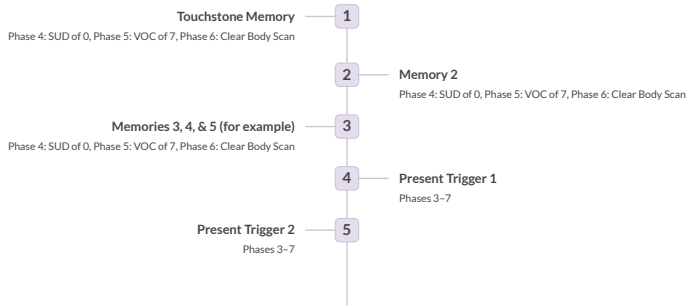
A present trigger is treated as another past, recent memory.

It is assessed and processed using the same standard EMDR protocol — with its own image, NC, PC, emotions, and body sensation.



When to Process Present Triggers

Timing matters. Process present triggers after the past root memories have been sufficiently reprocessed — or when clinically indicated before completion of all past targets.



PRESENT TRIGGERS

Key Reminders

May Lose Charge


Triggers often resolve as root memories are processed

Evaluate Every Session

Check SUD levels regularly — don't assume activation

Indicators of Progress

Fading triggers signal successful treatment movement



CHAPTER 3

Review of Future Desired State


"How would you rather feel, react, or believe?"

Completed for each **present trigger**. The Future Template is among the most **neglected yet vital** parts of the EMDR protocol – don't skip it.


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Effect of the Future Desired State

Builds a vision of the future – helping the client not just heal the past but move toward who they want to become.
Strengthens neural links to desired feelings, beliefs, and behaviors.



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FUTURE TEMPLATE PROTOCOL

Plug Future Desired State into the Protocol

The Future Desired State is the foundation for the **Future Template Script** – guiding the client to mentally rehearse the new response.

- Review the script carefully. This step consolidates treatment gains and prepares the client for real-world application.

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CHAPTER 4

Recent Restricted Processing

An introduction to EMD and EMDr – narrowly focused approaches for specific clinical situations.

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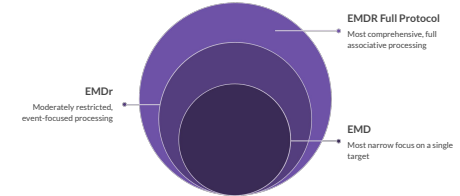


RECENT RESTRICTED

EMD (Shapiro, 1987)

Francine Shapiro's original method, EMD focuses exclusively on a single target to reduce disturbance without broader associative processing.

The Full Scope of Processing: A Continuum



The focus gets more narrow to restrict and less narrow for more comprehensive effects.

From most narrow (EMD) to most comprehensive (EMDR): the focus widens as the client's stability and capacity for broader processing increases.

Narrow focus = more restriction. Wider focus = more generalization and associative processing.



EMD STRATEGY

Most Narrow Focus

Client notices a small, specific piece of the incident

- If associations arise, gently return to the target


Take a SUD after every set to maintain focus

The goal is reduction of disturbance – not full associative reprocessing.

EMD SCRIPT – PART 1

How to Start EMD

01	02	03
Choose a Target	Worst Part	Negative Cognition
Image, sound, or other piece of the memory	"What image represents the worst part?"	"What words go best with that image – a negative belief about yourself now?"
04	05	
Positive Cognition	Initial SUD	
"What would you rather believe about yourself now?"	"How disturbing does it feel to you now?"	



EMD SCRIPT – PART 2

Continuing the EMD Protocol


Step 6
"What would you rather believe about yourself now?"

Step 7 – SUD Scale
"On a scale of 0–10, how disturbing does it feel to you now?"

Step 8 – Begin BLS
"Bring up that [image/sound], the negative words, and follow my fingers."

After Each Set
"Take a breath. On a scale of 0–10, how disturbing is that image now?"

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EMD STRATEGY


Begin Eye Movements

EMD uses **shorter, faster sets** compared to standard EMDR.

Set Length
10–12 passes per set

Pace
Shorter and faster than standard EMDR

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EMD STRATEGY

Take a SUD After Every Set

"On a scale of 0–10, how disturbing is that now?"

Checking SUD after every set keeps the client anchored to the specific target and prevents drift into broader processing.

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EMD STRATEGY

Moving Toward Closure

Once the client reaches **0** or as low as possible on the SUD:

"When you bring up that image and the words [PC], how true do those words feel to you now on a scale of 1–7, with 1 being completely false and 7 being completely true?"

Once VOC is as high as possible, **stop and proceed to closure.**

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EMDR STRATEGY

Recent / Restricted



EMDr is less restrictive than EMD – it allows **more associative processing** when the client can tolerate it.

If the client becomes overwhelmed with a specific detail, **switch to EMD** to narrow the focus and stabilize.

Think of EMDr as a flexible middle ground between EMD and full EMDR.



EMDR STRATEGY

EMDr Is an Event

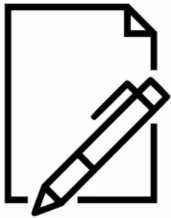
EMDr targets a **recent event from beginning to end** – processing the full sequence of the incident in a restricted but connected way.

It is especially useful for recent traumatic events where full EMDR might be premature.



EMDR STRATEGY

EMDr Script – Day 6



Please review the EMDr script in your practice sheets.

Practice reading the script aloud before applying it with clients. Familiarity builds confidence and clinical fluency.



CHAPTER 5

Beyond the Basic Training

Ethics, legality, support, and your path forward as an EMDR practitioner.



ETHICS & LEGALITY

Practice Within Your Scope

- Resist pressure to use EMDR as a quick "technique"
- Complex referrals require strong clinical judgment

Prioritize **self-care** alongside client care

Ensure **informed consent** before every EMDR session



PROFESSIONAL SUPPORT

You Are Not Alone

Build your professional support network through:

EMDRIA

The leading professional EMDR association

Community & Regional Networks

Connect with local EMDR practitioners and consultation groups

Google Groups

[PTI EMDR Graduates Group](#)



CONTINUING EDUCATION

Furthering Your Training

This is **the beginning** – not the destination. EMDR is a rich and evolving field with significant depth beyond basic training.

- ☐ Advanced trainings, consultation hours, and specialty applications await. **Keep going.**

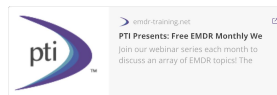


WHAT'S NEXT

We Won't Forget You

After basic training, you are a member of the Personal Transformation Institute for 1 year. Membership includes:

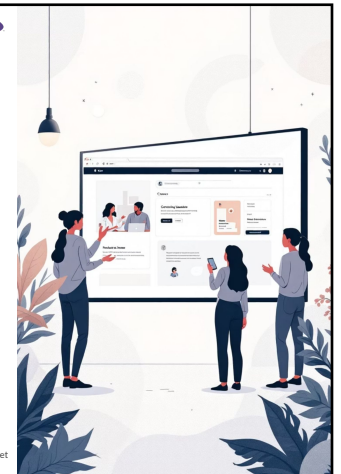
- Training & demo videos – access from day of registration
- Advanced Training updates – stay current on new offerings
- Member discounts – on advanced programs



Google Groups

[PTI EMDR Graduates Group](#)

groups.google.com – search: emdrtraining



IMPORTANT NOTE

Basic Training Is Not Certification

Upon completing all training and consultation hours, you receive a **Certificate of Completion** – not EMDRIA Certification.

Certificate of Completion
Awarded after 10 hours of consultation + full basic training

EMDRIA Certification
Requires 20 hrs consultation + 12 hrs advanced training – offered through our Advanced Certification groups



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Your Next Steps with PTI

You've completed the 6-Day SAFE EMDR Basic Training. Here's how to keep growing.

Get Certified
Enroll in the SAFE EMDR Advanced Certification Package at a special graduate discount.

Approved Consultant
Become an approved consultant through the PTI assistant program

Join the Team
Apply to join PTI staff and help others on their EMDR journey.

Find your Advanced Certification discount code in your course in Training Portal (will also be emailed)

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A Special Discount – Just for You

For completing this training, you're eligible for a **discount on the Advanced Certification Package** – available for a limited time after training ends.

You also have a code for **1 month free in the Pathways CE Library**. Both codes are in your cohort training portal.



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Thank You

It has been an honor learning alongside you. Keep practicing, keep consulting, and keep going.

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