SUMMARY SHEET:
The Recent Traumatic Episode Protocol (R-TEP):
An Integrative Protocol for Early EMDR Intervention (EEI)

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SUMMARY SHEET BY MARILYN LUBER

Name: __________________________ Date Today: __________
Date of Trauma: __________ Recent Trauma Episode: __________

☑ Check when task is completed, response has changed, or to indicate symptoms.

Note: This material is meant as a checklist for your response. Please keep in mind that it is only a reminder of different tasks that may or may not apply to your incident.

History Taking/Intake: Assessing Readiness for EEI

Phase 1: Client History—Focus on past traumas and resources
Administer the Impact of Event Scale (IES-R) questionnaire. Score: ________

Summarize Readiness: Severity, Motivation and Strengths (SMS) Rating

<table>
<thead>
<tr>
<th>S = Severity (low)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 (high)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M = Motivation (low)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5 (high)</td>
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<tr>
<td>S = Strengths (low)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5 (high)</td>
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</tbody>
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(If Severity is high, minimum Motivation and Strengths should be 3 or higher)

Preparation/Resources

Phase 2: Preparation

Four Elements Exercise for Stress Management: ☐ Completed
Resource Connection: ☐ Completed
Other Self-Calming/Stabilization Exercises: ________________________________

Explanation of R-TEP: ☐ Completed
Episode Narrative: (main facts, no need to write all the details)

Assessment and Desensitization: Points of Disturbance (PoDs)

Google Search for PoD #1 of T-Episode:

Continue On additional pages if needed.
Phase 3: Assessment

(Do the full assessment, if possible. If high activation/inappropriate, do partial assessment.)

PoD#1: __________________________________________________________

NC: ____________________________________________________________

PC: ____________________________________________________________________VoC: _______/7

Emotions: ____________________________________________________________________SUD: _______/10

Body Location: _______________________________________________________

Phase 4: Desensitization/Telescopic Processing

Main Strategy: EMDr Strategy

1. **EMDr Strategy** = when associations directly related to the current Traumatic Episode/or are adaptive, continue with sets of BLS (or after two to three adaptive associations go back to PoD#1 and check SUD ___/10).

   When associations do not relate to T-Episode, go BTT (PoD#1), check SUD ___/10.

   When SUD reduces to ecological level go, to Installation.

If the PoD is an intrusion (intrusive image/sensation/feeling/thought), use EMD Strategy:

2. **EMD Strategy** = if associations are directly related to the PoD#1/adaptive, continue BLS.

   If associations do not relate to the PoD#1, go Back To Target (BTT) and check SUD ___/10.

   **Note:** If SUD does not reduce after about six to eight sets, “zoom out” in a natural transition to the EMDr Strategy.

   When SUD does reduce to ecological level, go to Installation.

**Google Search for PoD #2 of T-Episode:** ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Phase 3: Assessment
(Do the full assessment, if possible. If high activation/inappropriate, do partial assessment).

PoD#2: ________________________________
NC: ________________________________
PC: ________________________________ VoC: _____ /7
__________________ Emotions: _______________ SUD: _____ /10
Body Location: ________________________________

Phase 4: Desensitization/Telescopic Processing

Main Strategy: EMDr Strategy

1. EMDr Strategy = when associations directly related to the current Traumatic Episode/or are adaptive, continue with sets of BLS (or after two or three adaptive associations go back to PoD#2 and check SUD ___/10).
   When associations do not relate to T-Episode, go BTT (PoD#2), check SUD __/10.
   When SUD reduces to ecological level, go to Installation.

2. EMD Strategy = if associations are directly related to the PoD#2.__/adaptive, continue BLS.
   If associations do not relate to the PoD#2, go Back To Target (BTT) and check SUD __/10.

Note: If SUD does not reduce after about six to eight sets, “zoom out” in a natural transition to the EMDr Strategy.
   When SUD does reduce to ecological level, go to Installation.

Google Search for PoD #3 of T-Episode: ________________________________
______________________________
______________________________
______________________________
______________________________
Phase 3: Assessment

(Do the full assessment, if possible. If high activation/inappropriate, do partial assessment.)

PoD#3: __________________________
NC: __________________________
PC: __________________________ VoC: _______ /7
Emotions: __________________________ SUD: _______ /10

Phase 4: Desensitization/Telescopic Processing

Main Strategy: EMDr Strategy

1. *EMDr Strategy* = when associations directly related to the current Traumatic Episode/or are adaptive, continue with sets of BLS (or after two or three adaptive associations go back to PoD#3 and check SUD ___/10).
   - When associations do not relate to T-Episode, go BTT (PoD#3), check SUD ___/10.
   - When SUD reduces to ecological level, go to Installation.

2. *EMDr Strategy* = if associations are directly related to the PoD#3/adaptive, continue BLS.
   - If associations do not relate to the PoD#3, go Back To Target (BTT) and check SUD ___/10.

Note: If SUD does not reduce after about six to eight sets. “zoom out” in a natural transition to the EMDr Strategy.

   - When SUD does reduce to ecological level, go to Installation.

Google Search for PoD #__ of T-Episode: __________________________
________________________
________________________
________________________
Phase 3: Assessment

(Do the full assessment, if possible. If high activation/inappropriate, do partial assessment).

<table>
<thead>
<tr>
<th>PoD#</th>
<th>NC:</th>
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Phase 4: Desensitization/Telescopic Processing

**Main Strategy: EMDr Strategy**

1. *EMDr Strategy* = when associations directly related to the current Traumatic Episode/or are adaptive, continue with sets of BLS (or after two or three adaptive associations go back to PoD# and check SUD /10).
   
   When associations do not relate to T-Episode, go BTT (PoD#), check SUD /10.
   
   When SUD reduces to ecological level, go to Installation.

2. *EMD Strategy* = if associations are directly related to the PoD#/adaptive, continue BLS. If associations do not relate to the PoD#, go Back To Target (BTT) and check SUD /10.

**Note:** If SUD does not reduce after about six to eight sets, “zoom out” in a natural transition to the EMDr Strategy.

When SUD does reduce to ecological level, go to Installation.
Note: Make a strong closure at the end of each session, using the Four Elements Exercise for Stress Management, Closing Resource, etc.

**Episode Level**

When there are no more PoDs identified with the Google Search to process, check Episode SUD (E-SUD).

E-SUD: ___/10

When the SUD is ecological or can be viewed calmly, install Episode PC (E-PC).

Ask: “What have you learned from this episode?”

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E-PC: ________________________________

VoC: _____ /7

**Phase 6: Episode Body Scan**

Unresolved tension/tightness/unusual sensation:____________________________

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If SUD is still not ecological and the T-Episode cannot be viewed calmly, consider using the EMDR Standard Protocol for underlying issues beyond the T-Episode.

Client gives consent to new contract.  

□ Completed

**Phase 7: Closure of the Episode**

IES-R is administered post session  

□ Completed

**Phase 8: Follow Up**

Episode SUD: ___/10

Resolved.  

□ Completed

If SUD is not ecological, use G-Search to identify any residual targets.

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3-month follow up: IES-R is implemented 3rd time: _______  

□ Completed

Comments: ________________________________