EMDR Fidelity Rating Scale (EFRS)

The Clinician Forms

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EMDR FIDELITY RATING SCALE

Single Session Summary (SSS) Form
Completed by the Clinician

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Session # _____   Client/Participant# _____

Session Date: _____   Clinician Code: _____

To be completed by Rater   Rater #:   Review Date:

I. ☐ **Introductory (INTRO)**
   - ☐ History–taking and Treatment Planning
   - ☐ Preparation
   - ☐ Safe/Calm Place Exercise

II. ☐ **Resource Development and Installation (RDI)** (optional)

III. ☐ **Adverse Life Experiences (ALE) Processing:**

   ○ Past - Target Title: _____

   ○ Present - Target (Trigger/Symptom) Title: _____
   - ☐ Assessment (of new target)
   - ☐ Re-evaluation (if previous EMDR trauma processing session)
   - ☐ Desensitization
   - ☐ Installation
   - ☐ Body Scan
   - ☐ Closure

IV. ❑ Future Template (FT)

○ Future – Target Title _____

Modifications to the Protocol

Did you modify the protocol? ❑ No ❑ Yes

If yes, please describe the nature of the modifications and your reasons for them.

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Additional Comments:

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Treatment Plan Tracking (TPT) Form
Completed by the Clinician

Client/Participant # _____   Clinician Code: _____   First Session Date: _____

Last Session Date: _____   Number of Sessions Completed _____

To be completed by Rater	Rater #:	Review Date:

This form provides space for a limited number of targets. If more targets are identified for Presenting Issue #1, use an additional Presenting Issue #1 form, indicating on the first form, "Continued on next page".

PRESENTING ISSUE #1							
TARGETS	Identified in Session #	Processed in Session #					
Past							
Past							
Past							
Past							
Present							
Present							
Present							
Present							
Future							
Future							
Future							
Future							

COMMENTS: _____

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This form provides space for a limited number of targets. If more targets are identified for Presenting Issue #2, use an additional Presenting Issue #2 form, indicating on the first form, "Continued on next page".

PRESENTING ISSUE #2							
TARGETS	Identified in Session #	Processed in Session #					
Past							
Past							
Past							
Past							
Present							
Present							
Present							
Present							
Future							
Future							
Future							
Future							

COMMENTS: _____

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This form provides space for a limited number of targets. If more targets are identified for Presenting Issue #3, use an additional Presenting Issue #3 form, indicating on the first form, "Continued on next page". If additional Presenting Issues are identified, change the number on the form to read Presenting Issue #4, etc.

PRESENTING ISSUE #3							
TARGETS	Identified in Session #	Processed in Session #					
Past							
Past							
Past							
Past							
Present							
Present							
Present							
Present							
Future							
Future							
Future							
Future							

COMMENTS: _____

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