

## EMDR FSS Case Presentation Format - Possible Areas of Exploration

---

Dear EMDR Clinicians,

We offer you this suggested case presentation format in the hopes that it will contribute to your finest and most effective use of EMDR in your efforts to reduce suffering that results from trauma, neglect, and other adverse life experiences. Our gratitude extends to the EMDR Institute and its community. We join The Institute in giving permission for the posting of this document to its Listserv and on its website.

The suggested EMDR FSS Case Presentation Format (FSS) is attached and can be utilized in a variety of situations and contexts. While not required at all, using all or part of the format can be very helpful to those who would like to provide you with the most useful feedback possible. It is more generous to ask questions rather than withhold them. Someone else has probably wondered about your question too, so please ask - mindful of confidentiality. Thank you!

The use of the suggested EMDR FSS Case Presentation Format is not required to post cases or questions about cases.

### **EMAIL IS NOT SECURE**

Please use caution when emailing any client information to anyone. Email is not secure. It can be hacked into and manipulated, is read by government and other agency software and people, and is stored indefinitely by these agencies and by the Internet companies through whom your email is routed. Any recipient of your email can keep your email indefinitely. Encryption does not change this situation.

Please consider your and your client's needs for confidentiality when you post. Please also consider contacting your List Moderator or any other colleague who may post your case for you, anonymously.

~~~~~

The FSS may also be useful in EMDRIA Approved Consultation formats ranging from Basic Training, Consultation-for-Certification, Consultation-for-Consultation, to Consultation in Special Topics. The FSS is not a substitute for training or competence in specific areas or for seeking Consultation in those areas.

The suggested EMDR FSS Case Presentation Format has been refined over many years. We offer our special thanks to all who have participated in providing input to this ever-evolving paper.

Those contributors include but are not limited to:

Carol Forgash, Zona Scheiner, Julie Stowasser, Andrew Leeds, Roy Kiessling, Peter Barach, the San Diego California EMDR Study Group, and Katy Murray. Permission is given to you to share this unaltered two-page FSS on your own website, with your colleagues, or in your practice.

## **EMDR FSS Case Presentation Format - Possible Areas of Exploration**

---

Please help us know if you are seeking feedback for a general question or a specific question that relates to an EMDR phase of treatment. Using all or part of this format, along with your own questions may improve the feedback you receive.

### **PHASE 1**

1. Who is your client? a) Age b) Gender c) Ethnicity d) Diagnoses
2. List the Client's most important Presenting Problems – one sentence summary/each
3. List the Client's Symptoms for each Presenting Problem
4. List the Client's Treatment Goals and Targeted Sequence Plan
5. State the First Problem to be addressed using the Targeted Sequence Plan
  - a) Presenting Problem
  - b) Presenting Triggers
  - c) Presenting Problem's Negative Cognition
  - d) Presenting Problem's Positive Cognition
  - e) Touchstone Event
  - f) Other events between the time of the Touchstone and Most Recent Event
  - g) Future Template for this Presenting Problem

Continue with the process above for the client's remaining presenting problems.

6. List other important elements of your client's history, for example: past, present, or future health concerns including medical procedures; substance use, abuse or dependence; domestic violence exposure; grief and loss; compulsive or impulsive behaviors; other trauma; previous mental health diagnoses and treatment; inpatient experiences; transference issues; and positive and negative responses to treatment.
7. List resources the client has or needs to acquire or enhance, for example: specific coping skills, self-capacities and ego states, current family and support systems, employment, and relationship status.
8. What is the client's DES score or other dissociative survey including any specific dissociative symptoms, current stability, and any other relevant information that might indicate you are working with complex PTSD and/or a dissociative disorder?

### **PHASE 2**

1. Describe any problematic responses during the preparation phase
2. Describe any resources installed, their rationale, and the client's response
3. Describe any necessary stabilization procedures and the client's response

### **PHASE 3**

1. Describe the Target selected, NC, PC, VOC, Emotions, SUDS, and Body Sensations
2. Describe any difficulties that might have emerged when setting up the target

### **PHASES 4-6**

1. Describe desensitization process, include Installation and Body Scan, and Future Template if applicable

### **PHASE 7**

1. Describe the client's experience of the Closure Process

### **PHASE 8**

1. Describe your observations of the client and the client's self-report during follow-up at their next session