EMDR ASSIST

FREE CLINICIAN RESOURCE

FOR EMDR CLINICIANS · NOVEMBER 2026 EDITION

Phase 4 Script with Working-Memory Tasks

Sample clinician prompts informed by EMDR 2.0 research: working-memory tasks, titration and safe close

A sample clinician script for Phase 4 sets that add working-memory tasks, informed by published EMDR 2.0 research. Adapt the prompts to the client, and use the titration and close-down steps to keep reprocessing inside the Window of Tolerance. This is not the developers' EMDR 2.0 protocol script: learn that through their training.

Use this live, in session.

EMDR Assist turns protocols like this into guided, phase-by-phase session tools — SUD/VoC tracking, scripts and notes in one place.

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Clinical use notice. Educational reference material for EMDRIA-trained clinicians. EMDR 2.0 is a research-supported extension of the standard 8-phase protocol (Shapiro, 2018) and requires prior Basic Training. It does not replace supervision, consultation, or clinical judgement. EMDR Assist is not affiliated with or endorsed by the developers of EMDR 2.0 (de Jongh, Matthijssen and colleagues).

1. Before you begin the set

Confirm Phases 1–3 are complete: target image, NC, PC, VoC, emotion, SUD, body scan. Confirm the client is inside the Window of Tolerance and Container / Calm Place are accessible. Explain the higher load:

> *'Today we will use eye movements plus a second task at the same time. The idea is to keep the memory in mind while your mind is quite busy — that is how the memory becomes less vivid and less charged. If it becomes too much, we can slow down or stop — you are in control.'*

2. Activation prompt

> *'Bring up the picture we identified, the words (NC), and notice what you feel in your body. On a 0–10 scale, where is the disturbance right now?'*

Record SUD. If SUD is below 4, consider whether the target is sufficiently activated or whether a stronger channel exists.

3. Introducing the dual task

> *'I am going to move my fingers quickly. While you follow them, I will also ask you to count backwards from 100 in threes. Keep the picture in mind. Ready?'*

Start with a moderate task (load 3–4 from the Dual-Task Menu). Sets last 20–40 seconds; observe effort.

4. Between-set check and titration

> *'Take a breath. Were you still seeing the picture? How clear was it, 0 to 10? How strong was the feeling, 0 to 10? What do you get now?'*

- Vividness or emotionality dropping → stay at current load.

- Both flat across two sets → escalate one rung (add a task, speed BLS, switch modality).
- Image lost or client confused → de-escalate: shorter set, simpler task, or standard BLS only.

5. Blocked processing — interweaves

- **Responsibility:** *'Whose responsibility was that then? Whose is it now?'*
- **Safety:** *'Where are you now? Are you safe in this room?'*
- **Choice:** *'Do you have choices now that you did not have then?'*
- **Somatic:** *'Notice where you feel that in your body. Stay with it and go with the task.'*

6. Closing an incomplete session

> *'We are going to pause here. Bring up your Container and place anything unfinished inside. Then bring up your Calm Place and let yourself settle. Notice five things you can see, four you can hear…'*

Document last SUD, last VoC, unfinished channels, dual-task load used, and any titration decisions in the session log.

References

Every clinical claim in this resource is traceable to the sources below. Instruments are public domain or used under their published terms.

1. de Jongh, A., & ten Broeke, E. (2019). *Handboek EMDR*. Pearson.
2. Matthijssen, S. J. M. A., Brouwers, T., van Roozendaal, C., Vuister, T., & de Jongh, A. (2021). The effect of EMDR versus EMDR 2.0 on emotionality and vividness of aversive memories in a non-clinical sample. *European Journal of Psychotraumatology*, 12(1), 1956793.
3. Shapiro, F. (2018). *EMDR therapy* (3rd ed.). Guilford.
4. van den Hout, M. A., & Engelhard, I. M. (2012). How does EMDR work? *Journal of Experimental Psychopathology*, 3(5), 724–738.