EMDR Readiness Checklist

REFERENCE GUIDE FROM EMDR CANADA

Interested in EMDR therapy, but not sure if you are ready? This checklist can help you reflect and prepare ahead of time! Please note this is for guidance only and is **not a substitute for medical advice.** Please discuss any questions or concerns with your therapist.

Į	Persona	land	Emotional	Readiness
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□ I am motivated and committed to my treatment and my own safety.
□ I have the skills to manage high levels of emotions (and/or, I am willing to learn
and practice these skills).
$\hfill \square$ My schedule allows me to commit to regular therapy sessions.
□ I am currently experiencing a life crisis and am not in active addiction.
$\hfill \square$ I have discussed and understand how EMDR could impact pending legal cases.
$\hfill \mbox{I}$ have discussed and understand how EMDR could impact other health conditions
I may have (such as heart conditions, neurological disorders, or other mental health
issues).

Safety and Support

□ I feel emotionally safe discussing difficult topics with my therapist.
□ I have strategies and time for self-soothing between sessions.
□ I have identified people in my life who can support me during therapy.
□ I feel comfortable reaching out for help if needed.



EMDR Readiness Checklist (continued)

I Have Talked to My Therapist About
□ My goals and reasons for considering EMDR.
$\hfill\square$ How EMDR works and whether it's a good fit for my needs.
$\hfill\Box$ Tools or techniques to manage distress during and after sessions.
☐ How to strengthen my coping skills before starting EMDR.
$\hfill\Box$ The potential challenges of EMDR and how we will address them.
$\hfill\square$ Ways to involve or inform my support system about the therapy process.
$\hfill\square$ My medical history, including mental and physical health considerations.
☐ Their credentials, training, and background to ensure alignment with my
needs.
Overall Questions
$\hfill\square$ I fully understand the potential challenges and risks of EMDR therapy and
have a plan to address them.
$\hfill\Box$ I have a safety plan in place for managing dissociation or other critical
reactions.
$\hfill \mbox{$\square$}$ I trust my therapist and feel comfortable sharing any questions or concerns.
□ I feel informed and in control of my decision to begin EMDR therapy.
Notes

