

Home Study Audio Course

“EMDR Masters Series – I”

Session 235 Presented at the EMDR International Association Annual Conference September 28, 2007 by Deany Lalotitis, LCSW-C

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B) How to take the paper exam.

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2) Note there is an additional paper exam fee of \$5 (for EMDRIA Conference exams). We suggest you pay the paper exam fee at the time of original exam purchase. You may also add \$5 per paper exam later.

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EMDRIA CE Credit Examination

1. The three-pronged approach in EMDR treatment planning refers generally to:
 - A. History taking, preparation and reprocessing.
 - B. Past, present, future.
 - C. Case conceptualization, reprocessing, re-evaluation.
2. With presenting complaints the focus in EMDR case conceptualization moves to all of the following except:
 - A. Identifying core beliefs.
 - B. Identifying touchstone memories using history taking and float back:
 - C. Identifying birth order.
3. Memory networks contain information about all of the following except:
 - A. Current sensory perceptions.
 - B. Negative beliefs about self.
 - C. Physical sensation.
4. The “Responsibility” theme involves all of the following except:
 - A. Confusion between self and other.
 - B. Confusion between past and present.
 - C. Taking inappropriate responsibility for actions.
5. The “Safety” theme involves all of the following except:
 - A. Confusion between internal and external locus of control.
 - B. Confusion between past and present.
 - C. Anxiety about being cut off from others.
6. Identification of themes is important to case formulation by supporting all of the following except:
 - A. Informs use of Cognitive Interweave.
 - B. Appreciation of developmental deficits.
 - C. Selecting whether to use visual, kinesthetic, or auditory bilateral stimulation.
7. Primary thematic issue in the case presented involves:
 - A. Responsibility.
 - B. Safety.
 - C. Control.

8. In the case presented being in a relationship leads the patient to:
 - A. Feel more secure.
 - B. Feel badly about herself.
 - C. Feel angry with her partner.
9. In the case presented, the patient experience all of the following except:
 - A. Chronic criticism by her parents.
 - B. Bullied by her brothers.
 - C. Incest.
10. Her resources include all of the following except:
 - A. Close to her sister.
 - B. Secure attachment with grandfather.
 - C. Successful professionally.
11. The target selected for her 1st EMDR reprocessing session was located in the:
 - A. Future.
 - B. Past.
 - C. Present.
12. Her core negative belief is:
 - A. "I'm not safe."
 - B. "I'm not good enough".
 - C. "I'm not in control."
13. Due to patterns of relating established in childhood, this patient:
 - A. Was at ease in most social situations.
 - B. Had difficulty making important business decisions.
 - C. Had trouble recognizing when people were not acting in her best interest.
14. Due to this patient's history generalization of treatment effects could be expected:
 - A. To have minimal generalization.
 - B. To have inconsistent generalization.
 - C. To have excellent generalization.
15. Many of the targets selected for reprocessing were initially:
 - A. In the future.
 - B. In the present.
 - C. In the past.
16. These targets were selected because:
 - A. The patient needed to develop more resources before she started reprocessing.
 - B. The emotions in these memory networks were more accessible.
 - C. Her inner self-helper identified these targets as needing attention.
17. After the "Can't say no" session the patient was able to:
 - A. Identify how she felt in response to others' demands on her.
 - B. Say "no" with those with whom she had an attachment.
 - C. Set boundaries with strangers.
18. After the "I'm a bad person" session she was able to:
 - A. Accept performance anxiety during a meeting.
 - B. Accept her past decisions to remain with her boy friend.
 - C. Break the 5-year pattern of renewing relationship with boy friend.

19. The early tendency for emotional numbing led to reprocessing a memory of:
- A. The “bee sting.”
 - B. The “snarling dog.”
 - C. The “blank face.”
20. Future templates can be used in all of the following situations except:
- A. When negative feelings persist in a target in the past after more than three reprocessing sessions.
 - B. When lack of negative feelings in the past and present does not generalize to positive actions.
 - C. To help the client develop more appropriate adult ego states.

Course Evaluation
Session 235

Deany Laliotis, LCSW-C - EMDR Masters Series - I
Credit Provider Andrew M. Leeds, Ph.D.

Please rate the following items using the scale below.

1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

OVERALL COURSE RATING: _____

- | | | | | | |
|--|---|---|---|---|---|
| 1. Presentation was consistent with objective and title..... | 1 | 2 | 3 | 4 | 5 |
| 2. Content was valuable and/or useful..... | 1 | 2 | 3 | 4 | 5 |
| 3. Course was appropriately challenging..... | 1 | 2 | 3 | 4 | 5 |
| 4. Course was taught at the promised level..... | 1 | 2 | 3 | 4 | 5 |
| 5. The following objective were met. | | | | | |
| A. Learn ways to think about and apply EMDR in cases where
traumas are not obvious | 1 | 2 | 3 | 4 | 5 |
| B. Learn how to apply cognitive interweave strategies to
facilitate client's process..... | 1 | 2 | 3 | 4 | 5 |

Comments:

Please rate the following using the scale below.

1 = Poor 2 = Below Average 3 = Average 4 = Above Average 5 = Excellent

PRESENTER:

_____ Communication Skills	_____ Knowledge of EMDR model
_____ Ability to answer questions	_____ Responsive to participants' needs

MATERIALS:

_____ Quality of audio recording	_____ Usefulness of course manual
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ADMINISTRATION:

_____ Administration of course	_____ Helpfulness of staff
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Course Affirmation

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By signing below you affirm that you: 1) listened to the entire Distance Learning Audio Course; 2) you read the corresponding handout that you have indicated; and 3) you completed the examination(s) by yourself without assistance from anyone else.

Print Name: _____ Date: _____

Signed: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

License Type & Number: _____