Installed Positive Cognition (PC):

**Target:** Can you bring up a situation that is likely to happen in the near future where the positive cognition will serve you? (*NOTE: Related to original target is best*)

**Image or worst part:** What image represents the worst part of this future scenario?  
(NOTE: If no image available or image doesn't carry much charge, simply have client notice the target or use another sensory channel like sound if that carries more charge)

**Positive cognition:** When you bring up the image (or worst part) of the future scenario with the positive belief of ______________________ what is your gut-level feeling of how true that feels to you right now with 1 being completely false and 7 being completely true?

➢ *If the VoC is 7:*

Place that positive belief of ______________________ together with the image (or worst part) of the future scenario.

- Continue with at least two sets of *FAST* bilateral BLS/DAS, checking in between each set
- When the client reports on what they are noticing now, continue with the next set of stimulation. Use the statements “Go with that,” or “Just notice that” to begin the next set of stimulation.
- After at least two sets of *FAST* bilateral DAS and material continues to be adaptive move to Body Scan (back side of the page)

➢ *If the VoC is lower than a 7:*

**Emotion:** What emotions do you feel when you bring up the image (or worst part) of the future scenario?

**Subjective Units of Disturbance (SUDs):** What is your level of disturbance as you bring up the image (or worst part), with 0 being no disturbance or neutral and 10 being the worst you can imagine?

**Location of Body Sensation:** What are you noticing in your body in this moment as you bring up the image (or worst part), and the emotions all together?

Begin FAST BLS/DAS after getting body sensation: *Go with that...* (Go to back side of page)
• Stay out of the way as much as possible, checking in after approximately 24-36 passes of bilateral DAS. After each set, invite a breath, and ask the client, “What are you getting? or “What are you noticing now?” The broadness of this open-ended question invites free association.
• When the client reports on what they are noticing now, continue with the next set of stimulation. Use the statements “Go with that,” or “Just notice that” to begin the next set of stimulation.
• You can then also ask for a SUDs rating at any time to check in on progress when responses become more adaptive. Take care not to do this excessively. Use a statement such as, “When you return to the future scenario where we began, what is your level of distress in this moment with 0 being no disturbance or neutral and 10 being the worst you can imagine?” If SUDs is anything but 0, ask: “What keeps it from being a 0?” and then continue with “go with that.”
• Proceed with sets of BLS/DAS until SUDs of future target image or worst part is as close to 0 as possible.
• Now check the VoC of the Positive Cognition: When you bring up the image (or worst part) of the future scenario with the positive belief of ______________________ (arrived upon positive belief from just completed related target memory) what is your gut-level feeling of how true that feels to you right now with 1 being completely false and 7 being completely true?
• If VoC is anything but 7, ask “What keeps it from being a 7 (completely true)？” and keeping “going with that” until VoC is 7 or as close as reasonable.

Installation Statement (Once VoC returns to 7 or as close as reasonable)

Place that positive belief of ______________________ together with the image (or worst part) of the future scenario. (Apply at least two sets of bilateral DAS)

Body Scan
Now that the positive belief has been further installed, scan your body from head to toe: What are you noticing?

• If the body scan is clear/adaptive, do another set of FAST BLS/DAS, saying,
• “Hold that clear body scan together with the future scenario and the positive belief of ______________________.”
• If there are residual disturbances, have the client notice and continue with fast sets until body scan is clear, then pair the statement above with at least one set of fast BLS/DAS.

Closure
In closure you can utilize the resources built and strengthened in Phase 2 to quell any residual distress and ensure a safe departure with or without SLOW bilateral DAS. You may also engage in a general debriefing about the session or the future template itself, being mindful to address any client concerns. Apprise what could happen following the session (i.e., processing may continue after session ends), and review a plan for safety, stabilization, and contacting support if needed.