**PE Fidelity Checklist**

**Imaginal Exposure and Processing Only**

**Patient ID: Date:**

**Therapist: Evaluator:**

**Part I: Essential Elements**

1. If necessary, therapist explained rationale for imaginal? Yes No N/A
2. If necessary, therapist gave client instructions to carry out imaginal? Yes No N/A
3. If necessary, “hotspots” procedure and rationale introduced? Yes No N/A
4. If necessary, therapist helped patient to identify hotspots? Yes No N/A
5. Therapist oriented the client to imaginal planned for that particular session? Yes No N/A
6. Therapist monitored SUDS ratings about every 5 minutes? Yes No N/A
7. Therapist used appropriate reinforcing comments during imaginal? Yes No N/A
8. Therapist elicited thoughts and feelings as appropriate? Yes No N/A
9. If necessary, therapist prompted for present tense, closed eyes? Yes No N/A
10. Imaginal lasted about 30-45 minutes (or about 15 for final imaginal)? Yes No N/A
11. Therapist processed the imaginal with client? Yes No N/A
12. Rate the adequacy of the therapist regarding Essential Elements:

1 = Poor 2 = Mediocre 3 = Satisfactory 4 = Good 5 = Excellent

1. Rate the degree to which the patient’s responses indicated understanding of the rationale:

1 = Poor 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent

Understanding Understanding

**Part III: Essential but not Unique Elements:**

1. Therapist maintained good rapport with patient? Yes No N/A
2. Therapist engaged with client in a professional manner? Yes No N/A
3. Therapist structured therapy time efficiently? Yes No N/A
4. Rate the adequacy of the therapist regarding Essential but not Unique Elements:

1 = Poor 2 = Mediocre 3 = Satisfactory 4 = Good 5 = Excellent

**Part III: Adherence Questions**

1. Therapist implemented interventions that are not included in this manual or model of treatment, except as clearly dictated by client safety? Yes No N/A
2. Therapist and client engaged in more than 15 minutes of off-task discussion? Yes No N/A

**Part IV: Overall Session Elements**

1. How difficult do you think this patient was to work with in this session?

1 = Not Difficult 2 = Somewhat 3 = Moderately 4 = Very 5 = Extremely Difficult

1. Did any significant problems arise during the session that led to a departure from

the treatment plan? (if yes. answer [a] & [b] below) Yes No N/A

* 1. Should the therapist have deviated from the planned session? Yes No N/A
  2. Rate the adequacy with which the therapist dealt with the problems that led to a departure from the treatment plan:

1 = Poor 2 = Mediocre 3 = Satisfactory 4 = Good 5 = Excellent

1. Rate the therapist’s overall skill as demonstrated for this session:

1 = Poor 2 = Mediocre 3 = Satisfactory 4 = Good 5 = Excellent

4. Additional comments regarding the conduct of this session: