

Consent for EMDR Treatment

I have been advised and understand that

1. EMDR is a treatment approach that has been extensively researched and validated for treatment with PTSD only. EMDR is also being used to treat many other psychological and emotional conditions successfully, and the research is still in progress.
2. We still do not know how exactly EMDR works like for any other psychotherapy method. Current speculation is that when a disturbing event occurs that overwhelms one's mind-body, it gets locked in the nervous system frozen in time and space, with the original pictures, feelings, thoughts, sounds, smells. These locked memories can get triggered whenever one is reminded of that past. Most times they stay unconscious yet causing a lot of upset, affecting how one may think, feel, or act.
3. EMDR seems to unlock these memories, and jumpstart one's brains ability to process, digest, and assimilate these disturbing experiences like it does normally with most experiences.
4. During EMDR processing, most clients re-experience aspects of the original disturbing event to some degree, and some may relive the trauma in all its intensity including the emotions and physical sensations.
5. During EMDR Therapy, other unresolved memories may surface without my intention
6. After the treatment session, my brain/body may continue to process the disturbing material, and I may experience intrusive thoughts, images, emotions, and body sensations including disturbing dreams.
7. **I am advised not to use the eye movements or other forms of bilateral stimulation on my own to process the disturbing material that may come up between the sessions.**
8. In all such situations, I understand that I have to make a note of it in my therapy log, and put away the disturbing material using container technique and safe/calm place, and any other resource discussed before.
9. I am also encouraged to do my own research and understand more about the EMDR Therapy, and seek any additional professional input I may need before starting my EMDR Therapy.
10. I have also received a copy of this signed Consent Form for my information

I have considered all the above issues, and by my signature below, I hereby consent to receiving EMDR treatment

Name

Signature

Date