

## Parenthood EEG Experiment Protocol

VP-Code:	
Date:	
Signed Confirmation	
Handedness	
Autism Questionnaire	
Starting Time Prep	
Starting Time Test	
End Time	
Started with A(adult) Or B (baby)?	
Resting-State (A & T)	
Calibration	
Stroop Start (Time)	
Stroop Pause 1	
Stroop Pause 2	
Stroop Pause 3	
EyeGaze Start (Time)	
Pause 1	
Pause 2	
Pause 3	
(Long Pause!!!)	
Pause 4	
Pause 5	
Pause 6	
Time of blood sampling	

**Anything Special? (EEG, EMG Electrodes, Comments of participant &....?)**