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## EMDR INFORMED CONSENT For the use of Eye Movement Desensitization and Reprocessing

Please initial each box after you have read the material.	
$\square$ EMDR is a treatment technique that facilitates the rep	·
has established EMDR as effective for the treatment of po	·
disorders, stress, sexual and physical abuse, disturbing me	emories, complicated grief and addictions.
$\hfill\Box$ The possible benefits of EMDR treatment include the	following:
<ol> <li>EMDR seems to unlock the nervous system and a The images, sounds and feelings are no longer rel event is still remembered, but the painful thought removed.</li> <li>EMDR can be thought of as a physiologically-bas of disturbing material and then storing that mater</li> <li>It is important and a beneficial for the client to re doing the healing.</li> </ol>	ieved when the event is brought to mind. The ts, emotions and sensations associated with it are sed therapy that assists the brain in making sense out rial away in a more normal process of memory.
☐ The possible risks of EMDR treatment include the follows:  1. Reprocessing a memory may bring up associated	· ·
<ul><li>also be reprocessed.</li><li>2. During the EMDR, the client may experience phy sounds associated with the memory.</li></ul>	sical sensations and retrieve images, emotions and
<ol><li>Reprocessing of the memory normally continues memories, flashbacks, feelings and sensations may</li></ol>	occur. The client may have dreams associated process these additional memories without help, timely manner if the client is unable to cope.
$\hfill\Box$ There is no indication that if EMDR therapy is interru therefore, a client can choose to discontinue treatment a	· · · · · · · · · · · · · · · · · · ·
☐ Alternative therapeutic approaches include the follow congruence with medication management as deemed ap	
☐ EMDR treatment will be consistently monitored under trained supervisor	er the direct clinical supervision by a qualified EMDR
☐ I have read and understand the above information at discontinue treatment at any time. I agree to participate in such participation.	
Client Signature	Date