



Consent for Eye Movement Desensitization and Reprocessing Treatment

I have been advised and understand that Eye Movement Desensitization and Reprocessing (EMDR) is a treatment approach that has been widely validated by research only with civilian PTSD. Research on other applications of EMDR is now in progress.

I have also been advised of the following:

- 1) Distressing unresolved memories may surface through the use of the EMDR procedure.
- 2) Some clients have experienced reactions during the treatment sessions that neither they nor the administering clinician may have anticipated, including a high level of emotion or physical sensations.
- 3) Subsequent to the treatment session, the processing of incidents/material may continue, and other dreams, memories, flashbacks, feelings, etc., may surface.

Before commencing EMDR treatment, I have thoroughly considered all of the above, I have obtained whatever additional input and/or professional advice I deemed necessary or appropriate to having EMDR treatment, and by my signature below I hereby consent to receiving EMDR treatment.

Patient/Client

Date

Psychotherapist

Date