



## EMDR Consent and Agreement Form

At a minimum, I have been educated about these points of EMDR:

- ❖ Eye Movement Desensitization and Reprocessing has been validated by research to be effective in treating civilian Post Traumatic Stress Disorder. Research on other applications is now in progress.
- ❖ The use of EMDR in my therapy will be to address:

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- ❖ Participating in EMDR does not mean I have been diagnosed with PTSD.
- ❖ EMDR involves working through memories which may result in my experiencing distressing thought, emotions, and/or physical sensations that may come along with the memory. What memories may arise and my reaction to these memories cannot be predicted.
- ❖ Further processing or working through of the memories may continue after/between therapy sessions. Other memories, dreams, thoughts, and feelings may surface.
- ❖ I have been instructed to consider obtaining more information about EMDR from:
  - My physician and/or psychiatrist
  - Any other mental health professionals I am seeing.
  - Internet search.

In choosing to participate in EMDR sessions I agree to:

*Provide honest, clear statements, upon questioning by my therapist, about any changes in my thoughts, emotions, or physical sensations during or between sessions.*

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date