EMDR Informed Consent

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Eye Movement Desensitization and Reprocessing (EMDR) is a simple but efficient therapy using bilateral stimulation (BLS)—tapping, tactile hand pulses, auditory tones or eye movements—to accelerate the brain's capacity to process and heal a troubling memory, a negative cognition, or a blocking belief. BLS, which occurs naturally during dream sleep, causes the two brain parts to work together to reintegrate the memory. Some clients experience relief, or positive effects, in just a few sessions. EMDR is effective in alleviating trauma-related symptoms, whether the traumatic event occurred many years ago or yesterday.

EMDR is not hypnosis, as it requires the person to stay grounded in the present moment, while recalling difficult memories of the past. A common response people have in traumatic situations is disassociation, which causes people to disconnect to the present. Disassociation is a common coping response in the brain to traumatic events, and everyone disassociates to some degree. Disassociation is a spectrum from daydreaming and zoning out to more severe disassociation seen in dissociative disorders. Grounding techniques are emphasized within EMDR to help ensure the person will maintain awareness in the present while recalling events of the past.

Scientific, evidence-based research has established EMDR as effective for the treatment of post-traumatic stress; phobias; panic attacks; anxiety disorders; sexual, physical, and psychological abuse; disturbing memories; complicated grief; addictions; negative self beliefs, and more. The official EMDR website provides additional information regarding the benefits of EMDR therapy. The Office of Veterans Affairs also endorses EMDR as the most widely used treatment for PTSD in veterans. The VA website provides additional information and testimonials of the benefits of EMDR.

[EMDR International Association Home | EMDR Practitioners (emdria.org)](https://www.emdria.org/)

[Eye Movement Desensitization and Reprocessing (EMDR) for PTSD - PTSD: National Center for PTSD (va.gov)](https://www.ptsd.va.gov/understand_tx/emdr.asp)

# The possible benefits of EMDR treatment include the following:

* The memory is remembered but the painful emotions, physical sensations, and disturbing images and thoughts are significantly lessened or no longer present.
* EMDR helps the brain reintegrate the memory and store it in the appropriate part of the brain. The client’s own brain reintegrates the memory and does the healing.
* The negative cognitive belief (ex. I am not good enough or I am not worthy) held about the event and additional prevailing events is reframed to a healthy cognitive belief.

# The possible risks of EMDR treatment include the following:

* Reprocessing a memory may bring up unpleasant associated memories. This is normal and those memories will also be reprocessed.
* During EMDR, the client may experience unpleasant physical sensations and retrieve difficult images, emotions and sounds associated with the memory.
* Reprocessing of the memory normally continues after the end of the formal therapy session. Other memories, flashbacks, feelings and physical sensations may occur. The client may have dreams associated with the memory. Frequently the brain is able to process these additional memories without help, but arrangements for assistance will be made in a timely manner if the client is unable to cope.

# Reprocessing traumatic memories can be uncomfortable; that means, some people won’t like or be able to tolerate EMDR treatment well. Others need more preparation, offered by the therapist, before processing traumatic events using EMDR.

* There are no known adverse effects of interrupting EMDR therapy; therefore, a client can discontinue treatment at any time.
* Alternative therapeutic approaches to EMDR may include individual or group therapy, medication, neurofeedback, or a different psychotherapy modality.
* This EMDR treatment is facilitated by a licensed clinical social worker who is trained in EMDR by the EMDR Training Group, which is approved by EMDR International Association (EMDRIA).

# History and Safety Factors

The client must:

* Be willing to tell the therapist the truth about what they are experiencing.
* Be able to tolerate high levels of emotional disturbance, have the ability to reprocess associated me mories resulting from EMDR therapy, and to use self-control and relaxation techniques (eg. calm place, container, and deep breathing exercises).
* Remember debriefing instructions and call their therapist, connect with supportive family or friends, or use meditation or other techniques (eg. calm place exercise) they have agreed to in therapy, if needed.
* Disclose to therapist and consult with their physician before EMDR therapy if they have a history of, or current, eye problems, a diagnosed heart disease, elevated blood pressure, or is at risk for or has a history of stroke, heart attack, seizure, pregnancy or other limiting medical conditions that may put them at medical risk.
* Inform therapist if they are wearing contact lenses and will remove them if they impede eye movements due to irritation or eye dryness. The therapist will discontinue bilateral stimulation eye movements if client reports eye pain and use another form of dual stimulation to continue reprocessing.
* Assess their current life situation to determine if the timing and approach of EMDR is appropriate. Client may need the ability to postpone a demanding work schedule immediately following EMDR session.
* Before participating in EMDR, discuss with therapist all aspects of an upcoming legal court case where testimony is required. The client may need to postpone EMDR treatment if they are a victim or witness to a crime that is being prosecuted because the traumatic material processed using EMDR may fade, blur or disappear and their testimony may be challenged.
* Understand disagreements with family and/or friends may occur as they adopt new skills and behaviors such as confidence, courage and boundary setting after processing problems and disturbing material using EMDR. Vulnerable clients may need to be protected.
* Consult with their medical doctor before utilizing medication. Some medications may reduce the effectiveness of EMDR. For example, Benzodiazepines may reduce effectiveness possibly due to state-dependent processing and/or regression may occur after ceasing anti-depressants.
* Address with the therapist their ability to attend to EMDR due to recent (within 12 hours) marijuana or alcohol use, cocaine dependence, long term amphetamine abuse, seizures, and/or other neurological conditions. EMDR is contraindicated with recent crack cocaine users and long-term amphetamine users.
* Discuss with the therapist any Dissociative Disorders; Dissociative Identity Disorder unexplained somatic symptoms, sleep problems, flashbacks, derealization and/or depersonalization, hearing voices, unexplained feelings, memory lapses, multiple psychiatric hospitalizations, or multiple diagnoses with little treatment progress. EMDR may trigger these symptoms.

I HAVE READ, AND I UNDERSTAND, THE POSSIBLE OUTCOMES OF EMDR LISTED ABOVE AND UNDERSTAND I CAN END EMDR THERAPY AT ANY TIME. I AGREE TO PARTICIPATE IN EMDR TREATMENT AND I ASSUME ANY RISKS INVOLVE IN SUCH PARTICIPATION:

NAME (printed):

SIGNATURE: DATE: