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COUPLE EMDR CONSENT

Eye movements have been shown in controlled studies to reduce affect and to increase attentional flexibility and the retrieval of episodic memory. For example, the standardized protocols for addressing posttraumatic stress disorder (PTSD) and chronic pain both include the targeting of past events that set the groundwork for the pathology, present triggers that elicit disturbance, and positive templates for appropriate future action.

I understand that the primary goal of **Eye Movement Desensitization and Reprocessing (EMDR)** treatment is to gain access and process stored memories by means of a set of standardized procedures, which include repetitive eye movements, auditory signals, or tactile stimulation.

EMDR is an integrative psychotherapy approach consisting of eight phases and specific protocols used to address presenting complaints. The aim of the first of the eight phases of EMDR is to assess clients' readiness for treatment and to formulate the optimal clinical goals. The first phase is Client History, evaluating the entire clinical picture to identify the experiences that will need to be processed to both eliminate the dysfunctional cognitive, emotional, somatic and behavioural elements and incorporate the positive experiences necessary for a successful future.

The Preparation Phase educates the client about the symptom picture and teaches a range of metaphors and self-control techniques to assist stabilization and facilitate processing.

The Assessment Phase accesses the target memory and identifies the image, currently held negative belief, emotion, and physical sensations attendant to the disturbing experience. It also specifies the current rating of distress, using the 0-10 (0=neutral, 10=the worst disturbance imaginable) Subjective Units of Disturbance (SUD) scale and strength of the desired positive belief, using the 1-7 (1 = completely false, 7 = completely true) Validity of Cognition (VOC) scale.

The reprocessing phases (Desensitization, Installation and Body Scan) utilize standardized procedures, which include bilateral stimulation (e.g., eye movement, taps, tones) to process the target. During the reprocessing phases, an association process is encouraged, which elicits other experiences contributing to the dysfunction, along with insights and shifts in affective and somatic manifestation. The Closure and Re-evaluation phases return the client to equilibrium, self-monitor mid-session distress, and ensure that positive treatment effects have been maintained.

(Client Signature) (Date)

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