



Informed Consent for Brainspotting

In my work with trauma survivors, I now offer Brainspotting (BSP), which is a revolutionary new way to efficiently process and resolve deeply rooted traumas, messages about self and the world, somatic (body-based) symptoms, and other issues in a safe, contained format.

BSP is a psychotherapy approach based in the way that the field of vision can be used to locate eye positions that correlate with relevance to inner neural and emotional experience. After they are located, these eye positions, or Brainspots, may, through maintaining eye fixation, lead to healing and resolution of issues that are held deeply in the non-verbal, non-cognitive areas of one's brain. It aims at a full, comprehensive discharge of activation (emotional distress) held in the brain and body.

Brainspotting is a powerful, focused treatment method that works by identifying, processing and releasing core neurological and somatic sources of emotional mind/body pain, trauma, dissociation and a variety of other challenging symptoms. It uses bilateral sound and fixed eye positions to enhance deep, direct and powerful healing. The therapist helps the client locate internal resources to contain emotional reactions.

BSP is especially applicable for treating trauma. People typically respond to traumatic experiences through primitive fight, flight or freeze instincts. BSP allows clients to significantly reduce and eliminate the tension and hyper-arousal associated with these survival instincts. Clients can look forward to integrating healing on emotional, somatic, psychological, spiritual and even physical levels.

As with all forms of psychotherapy, it is possible to experience some emotional distress and physical sensations related to prior life experiences. The clinical reports from Brainspotting show no additional side effects when used appropriately. As with any form of psychotherapy, emotions may continue to arise after a therapy session, and you are encouraged to discuss such emotions with me.

If you agree to proceed with applying Brainspotting methods toward reaching your goals, please sign and date below. Your consent is given freely, without any obligation and with complete understanding of the above information. We can discuss any aspect of this consent and you are under no obligation to continue to use these methods.

This consent may be revoked verbally at any time. Please follow up in writing any verbal request to revoke this consent.

Printed Name

Signature

Date