



## Informed Consent

Therapy For The Brain, LLC, located at 6650 W. Indiantown Road, Suite 200-57, Jupiter, FL 33458 – 561.339.9362 – is a leading neurofeedback office that utilizes Cygnet software and support through EEG Institute. Neurofeedback training has been used in connection with a variety of conditions that appear to be associated with dysregulation of brain activity. This includes but not limited to: remediation of attention deficits and hyperactivity, recovery some of the consequences of brain injury, and the reduction of incidence and severity of seizures. Signing this form gives Therapy For The Brain, LLC consent to treat the patient. X \_\_\_\_\_

The clinical staff at Therapy For The Brain, LLC includes certified practitioners that specialize in health related professions. The employees at Therapy For The Brain, LLC are not physicians; they are aware, through literature and experience in the clinical setting, of beneficial effects of the kind of neurofeedback they offer. Scientific investigation is ongoing to determine the mechanism by which these benefits are achieved. At present, Therapy For The Brain, LLC recommends the training on the basis of empirical observations of improvement in clients with similar conditions. X \_\_\_\_\_

During the training, it is expected that you will experience changes in symptoms relating to the regulation of the nervous system. Your experience may include an increase or decrease in any of the following: awake state, sleep, headaches, light sensitivity, mood, and any symptoms you experience during daily life, including any of those discussed during the evaluation. X \_\_\_\_\_

Changes in a positive or negative direction or any symptoms you may experience during the sessions are a valuable tool for finding the proper training sites and frequency, and will help you to have a better treatment outcome. IT IS YOUR RESPONSIBILITY TO REPORT YOUR CHANGES TO THE PRACTITIONER. If you fail to mention negative symptoms when they arise, the outcome – which has been shown not to be long lasting - can be extremely negative in the short term. X \_\_\_\_\_

The training appears to be a harmless procedure in the long terms as far as it is known at present. It is a non-invasive procedure and no injuries are known in the experience of Therapy For The Brain, LLC, or in the literature reviewed. Nevertheless, beyond this, Therapy For The Brain, LLC does not make any representation concerning the safety or efficacy of training. It is your responsibility (the patient) to monitor the subjective effects of training and continue training so long as benefit is perceived. X \_\_\_\_\_

By signing this form, the participant indicates his/her understanding of the principles set forth here, and waives any claim of damages due to the training, including worsening of any of the condition the client may have, claimed side effects, or the failure to improve with training. In addition, the client agrees to take full responsibility for his/her training, the benefit of such training, or lack thereof, and further agrees to hold Therapy For The Brain, LLC harmless from all claims associated with such training. X \_\_\_\_\_

Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_