

## LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH CONSENT FOR INFRA LOW FEEDBACK (ILF) NEUROFEEDBACK TREATMENT

### What is INFRA LOW FEEDBACK (ILF) NEUROFEEDBACK?

Neurofeedback has been around for over 30 years. Neurofeedback is a non-invasive treatment that taps into the brain's own ability to self-regulate. ILF neurofeedback focuses on training the brain's regular electrical activity (brainwaves). Neurofeedback is a process that involves placing sensors on your head to monitor your brainwaves. Here's how it works:

1. Detection: The sensors pick up your brainwave activity.
2. Feedback: This information is sent to a computer program that provides real-time feedback. You might see visual cues (like a video game), or experience tactual feedback in the form of a shaking stuffed animal held on your lap, or hear sounds that change based on your brain activity.
3. Guidance: The feedback helps guide your brainwaves toward a desired state, potentially improving mood, focus, and overall well-being.

In short, neurofeedback teaches your brain to function at its healthiest by engaging feedback to promote positive changes.

### Description of the Neurofeedback Session:

- A mental health staff member will ask about behaviors and symptoms that the client might want help to improve. The behaviors and symptoms reported will determine the information that is entered into the computer program and the placement of the sensors on the head/scalp.
- Clients will be awake and comfortably seated during the session. There will be no use of anesthesia or sedation.
- The mental health staff member will place sensors at a site on the client's head. The site will be cleaned with rubbing alcohol, nu prep (a mild abrasive), and a paste will be added to help the sensors stay on the head.
- During the session, the sensors record brainwaves, which are electrical activity in the brain. The computer program uses brainwaves to create feedback the client will view on a computer monitor.
- The client will hold an item for tactile feedback (a stuffed animal that vibrates), watch a video or play a video game for visual feedback while the sensors are placed on the head. Clients and caregivers will update the mental health staff member on progress by reporting symptoms and behaviors in every session.
- During the session the mental health staff member will monitor clients closely and will ask questions and make changes on the computer program based on the information reported.
- The sensors may be changed to different parts of the head during the session to address all the symptoms and behaviors identified. Once the session is complete, the sensors are removed from the head with water or rubbing alcohol.

This confidential information is provided to you in accord with State and Federal laws and regulations including, but not limited to, applicable Welfare and Institutions Codes, Civil Codes and HIPAA Privacy Standards. Duplication of this information for further disclosure is prohibited without prior written authorization of the client/authorized representative to whom it pertains unless otherwise permitted by law. Destruction of this information is required after the stated purpose of the original request is fulfilled.

<b>Name:</b>	<b>DMH ID#:</b>
<b>Agency:</b>	<b>Provider #:</b>
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### Number of Sessions and Frequency:

- Sessions can last 30-60 minutes. If clients have concerns, they can choose to stop the session at any time.
- A treatment period of 1-2 days a week for a duration of 3 to 6 months is recommended.
- Sessions may continue beyond 6 months depending on the client's response. Most clients remain in treatment a year after their initial treatment course to continue progress. Maintenance sessions may continue after the year.

### Potential Benefits of the Treatment/Procedure:

Neurofeedback may help or reduce symptoms of anxiety, depression, ADHD, autism spectrum disorder (ASD) and PTSD. This may include:

- Increased emotional stability and better coping mechanisms
- Improved focus and attention span
- Enhanced memory and learning abilities
- Sharper cognitive processing and problem-solving skills
- Improved sleep quality and reduced sleep disturbances
- Reduced pain perception and management
- Improved self-regulation and behavioral control

### Known potential short-term side effects include, but are not limited to:

- Headaches
- Irritability
- Grogginess
- Low energy
- Scalp discomfort at treatment site
- Disturbed sleep or trouble sleeping
- Nausea

There is no evidence of long-term negative side effects or that treatment is harmful. Some clients reported a temporary worsening in symptoms that were not serious and can be corrected in session. It is important that your provider is kept informed of any changes or negative effects, even if they seem unrelated to treatment so that it can be modified.

### Medications:

It is important to notify your provider of all medications and supplements you are taking, as well as any changes to your usual regimen. Because neurofeedback improves brain function, medications may need to be adjusted. Never stop or change dosing of any medications without your prescribing doctor's supervision.

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- ☐ I have read this form.
- ☐ This form has been read to me.
- ☐ This form was interpreted in \_\_\_\_\_ for me.

If a translated version of this Form was signed by the client and/or responsible adult, the translated version must be attached to the English version.

Information about neurofeedback has been explained to me including potential benefits, risks and side effects, and alternative treatments. I agree to participate in this treatment. I understand that consent may be withdrawn at any time.

\_\_\_\_\_  
Signature of Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Responsible Adult\*

\_\_\_\_\_  
Relationship to Client

\_\_\_\_\_  
Date

\* Responsible Adult = Guardian, Conservator, or Parent of minor when required.

I have explained the benefits and side effects of Neurofeedback as mentioned on page 1 and 2 and have obtained the client's/responsible adult's informed consent.

\_\_\_\_\_  
Signature of Practitioner and Discipline

\_\_\_\_\_  
Date

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