

# FIRST LIGHT COUNSELLING

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## INFORMED CONSENT

### Observed Experiential Integration (OEI)

Since 1994, a series of clinical procedures has been developed and used to reduce posttraumatic stress symptoms. This collection of experimental techniques has been referred to as “Observed Experiential Integration” (OEI) and will be used during therapy.

As with any therapy involving assessment or treatment of trauma, you will likely experience psychological distress at some point, as you recall events, people and situations that traumatized you. You will be asked to focus on memories while you have both eyes open and each eye open separately. During OEI procedures, people sometimes experience transient symptoms such as headaches, visual distortions and stomach or chest tension. These generally fade within 30-60 minutes, and more often within 5 minutes. In addition, it is possible that recall of traumatic incidents will trigger dissociative symptoms, such as drowsiness, light-headedness, numbness, or difficulty speaking. Again, such symptoms normally subside within 30-60 minutes or more commonly within 5-10 minutes. As with any new clinical procedures, there may be harms that we aren't yet aware of.

Based on clinical experience (over 20,000 hours) and 2 controlled studies with OEI techniques, these procedures provide significant, rapid relief from the major symptoms of Posttraumatic Stress Disorder (PTSD). The therapy proceeds one memory at a time, and recollection of each traumatizing event, person or situation is desensitized to the point where it is no longer disturbing to recall. For a given memory, this normally occurs within 60-90 minutes.

It is reasonable to alleviate *some* of the intensity of PTSD in 2 or 3 sessions, but you should not expect *all* your symptoms to be gone in several sessions if you have had many previous traumatic experiences.

Alternative therapies to OEI for PTSD symptoms include:

- Prolonged Exposure (spending time in situations associated with distress and focusing on them until the intensity subsides);
- Imaginal Exposure (thinking or writing or talking about the distressing situation or event until the intensity subsides);
- Cognitive Behavioural Therapies (changing thoughts & beliefs about yourself, and the people, events or situations that are traumatic for you to think about); or
- Eye Movement Desensitization or Reprocessing (combining Cognitive-Behavioural Therapy with bilateral stimulation – eye movements, hand-taps or sounds – while thinking about distressing events or situations or people);

As with any counselling or psychotherapy, *confidentiality* is limited by:

- Threat to self (suicide risk);
- Threat to other (homicide risk and duty to warn);
- Suspicion of child abuse;
- Intent to drive a motor vehicle while intoxicated by alcohol or drugs;
- Intent to have unprotected sexual contact or share IV drug needles, when infected by HIV and/or diagnosed with AIDS.

Even after you consent to participate in this therapy by signing below, you may refuse to participate or withdraw at any time without consequence.

I have read and understood the description of the therapy, and I willingly consent to use these procedures to reduce my distress and other problems during therapy.

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Cheryl Austin, MA, CCC, RCC

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date