



PREPARING FOR YOUR NEUROFEEDBACK BASELINE

This is a non-invasive and safe test. All surface gels are non-toxic. During the test the technician will observe and record your brain waves. Later, the results will be used to create training protocols that will be useful to trained health care professionals. This document will help you understand how to best prepare for the test.

CAP PLACEMENT AND SITTING STILL

The clinician will clean your forehead and ear lobes with alcohol to remove skin oils. Ear clips will be placed on your ear lobes. A special head cap made of stretchy material will be placed on your head. There are 20 small holes in the cap that will be filled with a cool feeling gel. A Q-tip is placed in each hole and slight pressure is applied to ensure contact with the scalp. The cap is connected to the equipment and your brain waves will be recorded by the technician.

The test has two parts: Eyes open for 4-8 minutes and eyes closed for 4-8 minutes. Clients sit in an inclined chair with a comfortable neck support. It is essential to limit movement in the chair. Limit eye movement, tongue movement and any form of muscle tension as much as possible. Breathe easy and relax but do not meditate. Do not think about problems, let go of all negative or busy thoughts. Relax as if you were getting a massage or laying on a beach.

PREPARATIONS BEFORE YOU ARRIVE **"EARLY"** THE DAY OF THE TEST

1. SHAMPOO YOUR HAIR AT LEAST 1-3 DAYS BEFORE THE VISIT
2. NO CONDITONER and NO HAIR SPRAY
3. DO NOT WORK-OUT OR JOG JUST BEFORE THE VISIT
4. BRING A SMALL CAP (BASEBALL CAP) TO WEAR HOME (your hair will have gel in it)
5. REMOVE CONTACT LENS (BRING YOUR OWN CONTAINERS)
6. BE PREPARED TO REMOVE EAR-RINGS
7. WEAR LOOSE FITTING COMFORTABLE CLOTHES
8. TURN OFF CELL PHONES AND/OR PAGER EQUIPMENT
9. DO NOT STAY UP LATE THE NIGHT BEFORE THE VISIT
10. DO NOT DRINK ALCHOLIC BEVERAGES FOR 2 DAYS BEFORE THE VISIT
11. MAXIMUM ONE CUP OF COFFEE/TEA OR Caffeine BEVERAGE (MORNING OF VISIT)

WHEN TO CANCEL

1. SICKNESS, FEVER, COUGHING SPELLS, NASAL ISSUES, EYE INFECTIONS, EAR INFECTIONS, etc.
2. TAKING NEWLY PRESCRIBED MEDICATIONS OR OTC remedies FOR CURRENT ILLNESS
3. DISRUPTION OF YOUR USUAL SLEEP PATTERN (LOSS OF SLEEP)
4. FAMILY OR PERSONAL CRISIS

I understand that I need to sit for up to 1 hour during the Cap placement and EEG test. I have informed the Clinic (staff) of medical problems [especially current infections] before the visit:

Client or Guardian

Name of minor child

Date