

INITIAL NEUROFEEDBACK QUALIFYING QUESTIONNAIRE

Name											
DOB											
Address											
Phone											
Email											
Date of PTSD	Diagnosis:										
Diagnosing P	hysician/Psychologist/Psych	iatrist	::								
Reason for di	iagnosis [include date(s) & d	etail(s	s) of t	raum	atic e	vent	(s) ex	perie	nced]:	
CRITERION TO	O BE MET (please check):								YE	ES	NO
Are you able	to commit to completing up	to 25	Neur	ofeed	back	(NFB) sess	ions	YE	ES	NO
Are you able in total? (1 to	to commit to completing up 2 sessions a week)							ions	YE	ES	NO
Are you able in total? (1 to Are you able	to commit to completing up 2 sessions a week) to abstain from consuming a	lcohol	durii	ng NF	B trea	atme	nt?		YE	ES	NO
Are you able in total? (1 to Are you able Are you able	to commit to completing up of 2 sessions a week) to abstain from consuming a to abstain from non-prescrip	lcohol tion d	durii rugs	ng NF (inclu	B trea	atme	nt? ot lim		YE	ES	NO
Are you able in total? (1 to Are you able Are you able to cannabis, o	to commit to completing up 2 sessions a week) to abstain from consuming a	lcohol tion d heroii	durii rugs n) dui	ng NF (inclu ring N	B treading I	atme out n	nt? ot lin ent?		YE	ES	NO
Are you able in total? (1 to Are you able Are you able to cannabis, of Are you able	to commit to completing up 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine,	lcohol tion d heroii ohol, r	durii rugs n) dui non-p	ng NF (inclu ring N rescri	B treading life tribed (atme out n	nt? ot lin ent?		YE	:s	NO
Are you able in total? (1 to Are you able to cannabis, of Are you able hours prior to Do you agree	to commit to completing up 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alco your brain mapping & brain to comply with all prescribe	Icohol tion d heroii ohol, r traini	durii rugs n) dui non-p ing se	ng NF (inclu ring N rescr	B treading I IFB tr ibed of s?	atme out ne eatm drugs	nt? ot lim ent? 24		YE	:s	NO
Are you able in total? (1 to Are you able to cannabis, of Are you able hours prior to Do you agree related medical?	to commit to completing up to 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alcopyour brain mapping & brain to comply with all prescribe cations?	lcohol tion d heroii bhol, r traini d psyc	rugs n) dun non-p ing se	ng NF (inclu ring N rescr ession opic 8	ding I ding I IFB tr ibed o s?	out neeatm drugs	nt? ot lim ent? 24		YE		NO
Are you able in total? (1 to Are you able to cannabis, of Are you able hours prior to Do you agree related medical?	to commit to completing up 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alco your brain mapping & brain to comply with all prescribe	lcohol tion d heroii bhol, r traini d psyc	rugs n) dun non-p ing se	ng NF (inclu ring N rescr ession opic 8	ding I ding I IFB tr ibed o s?	out neeatm drugs	nt? ot lim ent? 24		YE		NO
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Are you able in total? (1 to Are you able to cannabis, or Are you able hours prior to Do you agree related medic Do you agree Are you able	to commit to completing up to 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alcopyour brain mapping & brain to comply with all prescribed cations? to keep your prescribing phy to fund all treatment session	lcohol tion d heroii phol, r traini d psyc ysiciar	rugs n) during non-pring se chotro	ng NF (inclu ring N rescr ession opic 8	ding I ding I IFB tr ibed o s?	out neeatm drugs	nt? ot lim ent? 24		YE		NO
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Are you able in total? (1 to Are you able to cannabis, or Are you able hours prior to Do you agree related medic Do you agree Are you able AM I A GOOD On a scale of	to commit to completing up 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alco your brain mapping & brain to comply with all prescriber cations? to keep your prescribing phy to fund all treatment session CANDIDATE FOR NEUROFE 1-10 please rate your:	lcohol tion d heroii phol, r traini d psyc ysiciar	rugs n) during non-pring se chotro	ng NF (inclu ring N rescr ession opic 8	ding I ding I IFB tr ibed o s?	out neeatm drugs	nt? ot lim ent? 24		YE		NO
Are you able in total? (1 to Are you able to cannabis, or Are you able hours prior to Do you agree related medic Do you agree Are you able AM I A GOOD On a scale of Intent	to commit to completing up 2 sessions a week) to abstain from consuming a to abstain from non-prescrip cocaine, methamphetamine, to abstain from caffeine, alcopyour brain mapping & brain to comply with all prescriber cations? to keep your prescribing physto fund all treatment session	lcohol tion d heroii bhol, r traini d psyc ysiciar ysiciar	rugs (n) during second awa	ng NF (inclu ring N rescri ession opic 8	B treading last last last last last last last last	atme out ne eatm drugs er hea	ot liment? 24 alth	nited			

Please email completed form to neurofeedback@fswe.ca

If you are a qualifying candidate, you will be contacted to schedule your initial assessment session with your assigned Neurofeedback therapist. Thank you.