

Hello Freedom!

Dr. Susan Bremer
(616).291.2242

Client Agreement for Services

Theoretical Approach

My method of (coaching/support work) is called Splankna Therapy. It is a biblically based protocol for energy psychology. Mind-body/energy psychology utilizes the same system in the body that acupuncture and chiropractic are based on to resolve disturbing emotions that are stored in the body. The prevailing premise of the energy psychology is that the flow and balance of the body's subtle, electromagnetic energies are important for optimal physical, spiritual, and emotional health and for fostering well-being. Splankna Therapy is designed to help get to the origin of an emotional issue with the goal of rapidly desensitizing the emotional stress connected to a past event. Splankna Therapy incorporates Neuro-Emotional Technique, Thought Field Therapy, and EMDR, (Eye movement desensitization and reprocessing). While utilizing energy techniques, Splankna Therapy is faith-based and centered on prayer. Subsequently, it falls under the distinction of ministry. Traditionally biblical principles are also incorporated such as confession, repentance, and forgiveness.

Although energy techniques like Splankna Therapy appear to have promising emotional, spiritual, and physical health benefits, they have yet to be fully researched by the Western academic, medical, and psychological communities and therefore may be considered experimental. Energy techniques are self-regulated and they are considered alternative or complementary to the healing arts. Because energy techniques are relatively new healing approaches, the extent of their effectiveness, as well as their risks and benefits, are not fully known. If you ever have questions or concerns about the nature of the theories, methods, approaches and/or techniques I use, please feel free to ask me for further resources or references.

Outcome Expectations/Risk & Benefits/Treatment Plan

Please note that it is impossible to guarantee any specific results regarding your goals using any of the approaches I offer in my practice. However, we will work together to achieve the best possible results for you. Our work together requires your very active involvement, honesty and openness in order to change your thoughts, feelings and/or behavior. You will have to participate both in and out of our sessions. I will ask for your feedback and views on our work and its progress, and will expect you to respond openly and honestly. As with any intervention, there are risks associated with energy psychology. Risks might include remembering, talking about, or experiencing unpleasant events which result in uncomfortable levels of feelings like sadness, guilt, anxiety, anger, frustration, worry, etc, or experiencing anxiety, depression or insomnia, etc., or having difficulties with other people. Being confronted with your difficulties can be very challenging. Some changes may lead to what seems to be worsening circumstances or even losses (for example, significant emotional healing can disrupt marital stability).

In addition, if you choose to engage in Splankna Therapy, emotional or physical sensations or additional unresolved memories may surface which could be perceived as negative side effects. You may experience some temporary emotional distress and physical discomfort related to prior life experiences. If we are to work together we will need to specify methods, risks and benefits of treatments, the approximate time commitment involved, costs and other aspects of your particular situation. We will discuss a plan that seems most appropriate to help you reach your goals. However, regardless of our work together, you agree to take full responsibility for your self-care in the emotional, mental, physical, and spiritual dimensions of your life.

Other Important Information

Please be advised that I offer my services as Christian Ministry and that I am not a licensed mental health professional and the approaches I offer are not intended to be a substitute for medical diagnosis or psychotherapy and they do not replace the services of a licensed physician or licensed psychotherapist. You agree and understand it is your responsibility to consult your physician/psychiatrist for any specific medical problems. Further, you understand I may suggest you contact your physician or psychologist/psychiatrist if I believe it's advisable. In addition, you understand that any information shared during our sessions is not to be considered a recommendation that you stop seeing your physician or using prescribed medication, if any, without consulting with your physician/psychologist, even if after a session it appears and indicates that such medication or treatment is unnecessary.

Confidentiality will be maintained except for the following exceptions required by law to be reported: suspected harm to self or others, or suspected child or elder abuse.

Use of Touch

You understand the application of Splankna Therapy includes light touch on the back of the wrist/arm for muscle testing. Touch can be a potential problem in a support relationship if you feel it is inappropriate. If you have any misgivings, doubts, or any negative reactions to any physical contact, it is very important that you let me know as soon as possible so that we can discuss your concerns. You understand you have a choice about these techniques that involve touch.

Education and Training

2020 - Trained in level 1 Splankna Therapy, Pittsburgh, Pennsylvania

2021 - Trained in level 2 Splankna Therapy, Denver, Colorado

2021 - Trained in Master level Splankna Therapy, Colorado Springs, Colorado

Acknowledgement and Consent to Receive Services

By signing this document and any attachments hereto, you agree that I have disclosed to you sufficient information to enable you to decide to undergo or forgo any of the approaches and other services I offer. You understand that your consent to the nature of our sessions is given voluntarily, without coercion, and may be withdrawn at any time in the future. Further, you understand that Splankna Therapy is a relatively new healing approach and the extent of its risks and benefits are not fully known and you agree to assume and accept full responsibility for all risks associated with experiencing Splankna Therapy. You represent that you're competent and able to understand the nature and consequences of our proposed sessions and agree to be personally responsible for the fees related thereto. You have read and understand the above disclosure about the services offered by me and my training and education and you have discussed with me the nature of the services to be provided, and except in the case of gross negligence or malpractice, agree to release, indemnify, hold harmless and defend Splankna Incorporated and Hello Freedom, their owners, managing partner, members, employees, representatives, and consultants from and against any and all claims or liability, of whatsoever kind or nature, which you or your representatives may have, for any loss, damage or injury, including without limitation, physical, emotional, mental, financial, or spiritual, arising out of or in connection with your sessions.

Client's Signature

Date

Dr. Susan Bremer, Certified Master Splankna Practitioner

Date