**Constraint-Induced Movement Therapy (CIMT)**

**Consent form**

Constraint therapy can help to improve arm function after a neurological event (such as stroke or head injury).  It can promote participation of the affected arm during activities as well as improve movement, strength and co-ordination.

To participate in constraint therapy you will be asked to wear a glove / mitt / splint on your non affected hand to prevent its use during tasks. This must be maintained for the time frames as explained to you by your therapists. This helps to encourage the affected arm to participate in these events and stops the non-affected arm from taking over.

You will be asked to complete lots of exercises and tasks for the affected arm to improve movement, strength, co-ordination and ability to complete everyday activities.

For safety purposes you may take the constraint off your hand when mobilising.

The glove, sling or splint will be worn from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ during the day for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ days.

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ consent to wearing the hand constraint for the purpose of my therapy as outlined above. I have understood the risks and benefits to this method of treatment as outlined above.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_consent on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to wear the hand constraint for the purpose of their therapy as outlined above. I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have understood the risks and benefits to this method of treatment as outlined above.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_