

Full Name _____ Age/ Sex _____ M / F _____ Record # _____

USER GUIDE FOR SPECIALISTS: FOR CUSTOMIZED OR COMBINATION THERAPY

PROGRAM : ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

BELLABEE SET-UP INSTRUCTIONS:

1. Download the Bellabee apps from Google Play or the Apple store.
2. Connect the Bellabee headband to your mobile device earphone jack.
3. Turn the mobile device volume setting to maximum.
4. Put the Bellabee band around your head as instructed.
5. Run the desired app program on the mobile device.

GUIDELINES FOR BELLABEE USE:

Bellabee can be used for stand-alone therapy (using pre-set and customized programs) or in combination with Neurofeedback, Psychotherapy, Pharmacotherapy, and other therapeutic modalities. For example, the client could use the device at home between office sessions to improve retention. The “Custom Therapy” option lets you customize frequency and duration so you can create programs tailored toward your client’s needs. This arrangement could potentially reduce the number of therapy sessions, lessen the need for pharmacological agents, decrease the response period and subsequently reduce costs for clients and specialists.

RELATED INFORMATION:

This setting is supportive for Attention Deficit Hyperactivity Disorder (ADHD).

[Relevant Information](#)

[Bellabee Information](#)

[Neurofeedback and Bellabee](#)

[Scientific Research](#)

[FAQs](#)

Brainwaves	Delta	Theta	Lo-Alpha	Hi-Alpha	(SMR)	Lo-Beta	Hi-Beta	Gamma
Normal Range	0.5-4 Hz	4-8 Hz	8-10 Hz	10-13 Hz	(13-15 Hz)	13-20 Hz	20-30 Hz	30 Hz & above

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DATA INPUT

ADHD

Reason for Use	
Baseline symptom rating	1 2 3 4 5 6 7 8 9 10 (1 = mild; 10 = severe)
Initial response seen	after _____ sessions
Improvement/end result	0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%
Before QEEG (Findings)	
After QEEG (Findings)	
CUSTOM SETTINGS	Neurofeedback/ Psychotherapy/ Pharmacotherapy/ Other Therapies
Specialists/Combination Therapy	For combined therapy, start with appropriate custom settings given below and adjust according to the brainwave analysis and individual response.
<u>Deviation:</u> Excessive slowing noted compared to fast wave activity. Theta to Beta is more than 3:1 (usually at Cz)	12 Hz (5 min), 13 Hz (5 min), 14 Hz (5 min), 15 Hz (45 min)
[ref: typical neurofeedback plan]	1. Inhibit 3-7Hz Theta, Reward 12-15Hz Lo-beta, Inhibit 22-30Hz Hi-beta at C4 or Cz. 2. Z score training at C3-C4,P3-P4, F3-F4. 3. ISF at T3-T4. 4. sLoreta in the DMN or ROI. Inhibit theta in relevant areas.
<u>Deviation:</u> Excess frontal Beta (usually at F3/F4)	13 Hz (5 min), 12 Hz (5 min), 11 Hz (5 min), 10 Hz (45 min) OR 11 Hz (5 min), 10 Hz (5 min), 9 Hz (5 min), 8 Hz (45 min)
[ref: typical neurofeedback plan]	1. Inhibit 3-7Hz Theta, Reward 12-15Hz Lo-beta, Inhibit 22-30Hz Hi-beta at C4 or Cz. 2. Z score training at C3-C4, P3-P4, F3-F4. 3. ISF at T3-T4. 4. Alpha training at O1/O2 or Pz (Enhance 11-12Hz).
<u>Deviation:</u> Low Alpha Peak frequency for the clients age is usually associated with slower processing speed (Usually at Pz)	11 Hz (10 min), 12 Hz (10 min), 13 Hz (40 min)
[ref: typical neurofeedback plan]	1. Reward Alpha typically 11-12 Hz at Pz. (Be aware of client age and response and make frequency adjustment accordingly). 2. ISF T3/T4 (Although no current research is currently available clinical experience has shown an increase in alpha peak frequency for most individuals). 3. sLoreta training ROI precuneus/ occipital (enhance alpha).
<u>Deviation:</u> Frontal Slow is seen where there is excessive Theta or Alpha activity in the frontal	12 Hz (5 min), 13 Hz (5 min), 14 Hz (5 min), 15 Hz (45 min)

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lobes (usually at F3/F4)		
[ref: typical neurofeedback plan]	<ol style="list-style-type: none"> 1. Inhibit 3-7Hz Theta, Reward 12-15Hz Lo-beta, Inhibit 22-30Hz Hi-beta at C4 or Cz. 2. Z score training at C3-C4,P3-P4, F3-F4. 3. ISF at T3-T4. 	
<u>Deviation:</u> Fast Alpha, not low amplitude. There is usually a complaint of attention difficulties in conjunction with anxiety as the hyper-vigilance can act as a source of distraction. It has also been noted 1-2 years post injury in areas where there has been acute trauma.	12 Hz (5 min), 13 Hz (5 min), 14 Hz (5 min), 15 Hz (45 min)	
[ref: typical neurofeedback plan]	<ol style="list-style-type: none"> 1. Inhibit 3-7Hz Theta, Reward 12-15Hz Lo-beta Inhibit 22-30Hz Hi-beta at C4 or Cz. 2. Z score training at C3-C4, P3-P4, F3-F4. 3. ISF at T3-T4. 	
<u>Deviation:</u> Persistent eyes open (EO) Alpha. In the eyes open state Alpha generally drops by 50% or more in amplitude or magnitude. This is due to the specific projection system of the hypothalamus. If this system is failing it is suggestive of reticulo-thalamic activation problems and can lead to under-arousal. In anxious individuals' Alpha can attenuate in the eyes closed (EC) condition.	12 Hz (5 min), 13 Hz (5 min), 14 Hz (5 min), 15 Hz (45 min)	
[ref: typical neurofeedback plan]	<ol style="list-style-type: none"> 1. Inhibit 3-7Hz Theta, Reward 12-15Hz Lo-beta, Inhibit 22-30Hz Hi-beta at C4 or Cz. 2. Z score training at C3-C4, P3-P4, F3-F4. 3. ISF at T3-T4. 	
Note:	Keep the client's age and response in mind and make frequency adjustments accordingly.	
RECOMMENDED GUIDELINES	Average	(Range)
Duration of each session	60 min	(40-80 min)
Sessions per week	6	(2-14)
Initial response after	20-30 sessions	(2-60)
Total sessions required	30-50	(20-Unlimited)

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