BEFORE TREATMENT

Safety Review Before Treatment

dTMS may not be appropriate for everyone. Our team reviews medical history before treatment.

- Seizure disorders or increased seizure risk
- Certain metal, magnetic, or implanted devices above the shoulders
- Other medical conditions that require clinical review

Does insurance cover dTMS for OCD?

Coverage for OCD dTMS varies by plan and may be less predictable than coverage for depression. Some plans may require prior authorization, documentation of diagnosis, and prior treatment history. BioMental Clinic can help review benefits and requirements.

What If I Have Both Depression and OCD?

Depression and OCD can occur together. Our clinical team works with you to identify which symptoms are most disruptive and which TMS coil and protocol should be prioritized.

H1 Coil: Depression

Stimulates both sides of the prefrontal cortex, with greater emphasis on the left dorsolateral prefrontal cortex (DLPFC). FDA-cleared for major depressive disorder.

H7 Coil: OCD or Depression

Stimulates the medial prefrontal cortex and anterior cingulate cortex. FDA-cleared for both OCD and major depressive disorder, using condition-specific protocols.

Not every TMS system, coil, or protocol is FDA-cleared for every condition. Your evaluation helps determine the most appropriate approach.

BioMental Clinic

What happens after the six-week course?

Response duration varies. Continue psychotherapy and medication as advised, and contact the team if symptoms return. Follow-up or maintenance planning depends on your response.

QUESTIONS?

When OCD symptoms persist

Our team can evaluate whether dTMS fits into your treatment plan.

JACKSONVILLE
904-853-5867
4141 Southpoint Drive East
Suite A
Jacksonville, FL 32216

SAN JUAN
787-558-5888
525 Ave Franklin D Roosevelt
Suite 1214
San Juan, PR 00918

www.BioMentalClinic.com
contact@biomentalclinic.com

Compassionate care. Science-backed results.

BioMental Clinic

Deep Transcranial Magnetic Stimulation

For Obsessive-Compulsive Disorder

- **FDA-cleared**
- **Non-invasive**
- **Well tolerated**
- **Insurance coverage may be available**

904-853-5867
www.BioMentalClinic.com

BioMental Clinic

When OCD Treatment Is Not Enough

If you or someone you care about is still struggling despite medication or therapy, it does not mean you have failed. Another option may help.

Deep transcranial magnetic stimulation (dTMS) is a noninvasive, office-based, FDA-cleared treatment for adults whose OCD symptoms remain disruptive. It is used as an additional part of a broader care plan.

BioMental brings more than 20 years of psychiatric experience and nearly a decade of caring for treatment-resistant conditions. We work with you and your current providers to determine whether dTMS may offer another evidence-based path forward and help navigate insurance requirements when coverage is available.

What Would Meaningful Improvement Look Like?

OCD can consume valuable time through intrusive thoughts, fears, urges, compulsions, and mental rituals. Meaningful progress may include:

- Spending less time on compulsions, rituals, or reassurance seeking
- Experiencing less distress from intrusive thoughts
- Participating more fully in work, school, relationships, and activities
- Reclaiming time and freedom from patterns controlled by OCD

What Is OCD?

OCD involves intrusive thoughts, fears, urges, or images and the repetitive behaviors or mental rituals used to reduce distress. Symptoms can consume time and interfere with work, school, relationships, and daily routines.

What Is dTMS for OCD?

BrainsWay Deep TMS is an FDA-cleared, office-based adjunctive treatment for adults with OCD. The H7 Coil delivers magnetic pulses to medial prefrontal and anterior cingulate regions within brain networks involved in OCD symptoms. Treatment is non-invasive and performed while you remain awake and seated.

Brief personalized symptom activation is part of the OCD treatment protocol before stimulation; it is not a psychotherapy session.

How dTMS Fits With Other OCD Treatments

dTMS may be combined with medication management and psychotherapy delivered individually, in groups, or through a structured program. Therapy may include cognitive behavioral therapy (CBT), particularly exposure and response prevention (ERP), and DBT skills when appropriate.

You do not need to pursue every option or begin everything at once. We will consider your experience, treatment history, needs, and preferences to decide what fits your recovery journey and when.

Common Side Effects

Headache or discomfort of the scalp, face, jaw, or neck may occur, especially early in treatment. These effects are usually mild and often lessen as treatment continues. Tell the team about any discomfort so the helmet position or stimulation settings can be adjusted.

- A seizure is a very rare but serious risk. Your clinical team will review factors that may increase this risk before and during treatment.

Evidence Snapshot

In the pivotal randomized study, 38.1% of patients receiving active dTMS achieved at least a 30% reduction on the standard OCD symptom scale (Y-BOCS) after six weeks, compared with 11.1% receiving sham treatment.

In a later observational study across 22 clinics, 57.9% of patients with follow-up scores met response criteria after 29 sessions. This study did not include a sham comparison.

In clinical practice, dTMS may be integrated with psychotherapy, medication, and other supports. Coordinated care may support progress, although individual results vary.

At a Glance

18 min	5 days	6 weeks
Typical stimulation	Typical treatment week	Common course

Is dTMS an Option for Me?

dTMS may be appropriate for adult patients diagnosed with OCD who continue to have symptoms despite standard treatment.

- Age 18 or older
- Tried medication for OCD without enough improvement
- Had side effects or difficulty tolerating medication

What to Expect

Treatment does not require anesthesia or sedation. Most patients can return to usual activities afterward.

- First visit: evaluation and mapping establish helmet position and a personalized stimulation level
- Later visits: brief symptom activation is followed by approximately 18 minutes of stimulation