

ALEX CAMPBELL, PHD, MFT, BCBA-D

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Informed Consent for Treatment

The following office policies and agreements are offered to facilitate our work together.

I, _____, hereby authorize Dr. Alex Campbell to provide psychotherapy on a 50-minute per session basis for a period of time to be determined by mutual agreement. I understand that the purpose is (1) to improve my interpersonal relationships; (2) to increase my satisfaction in my personal and/or professional life; and/or (3) to deepen my inner work, but there is no guarantee that this will occur. I also understand that it is common to experience uncomfortable feelings in the course of therapy; these experiences are often part of a natural process and may help point the way to change.

I understand that maximum benefit will occur with consistent attendance and that I will keep regular appointments. If I need to cancel or change an appointment I will give as much advance notice as possible. I agree to pay for a missed appointment if, for any reason, I have not given at least 24 hours notice.

I understand that Dr. Campbell may be out of town for various reasons which may require canceling/changing client appointments. On those occasions there will be the name and number of a qualified professional on his office answering service. In case of an emergency, I understand that I may call the Psychiatric Emergency Service at Marin General Hospital at 499-6666.

I understand that payment of \$120 per 50 minute session is due at the end of each session unless other arrangements are made, and that the fee may periodically be increased. I understand that if I wish to bill an insurance carrier, Dr. Campbell will provide a statement and it is my responsibility as the client to follow through. I understand that phone calls over 10 minutes in length are usually billed on the basis of the hourly fee. I understand that I am free to terminate the therapy at any time; also I understand that discussion of ending therapy over one or more sessions is likely to be a process that is beneficial to me and is highly recommended.

For couples and families in therapy: If one member of the family or couple shares something with the therapist which is unknown to the other (s), it is acknowledged that such withheld information may radically undermine the potential of the therapeutic work. Therefore, Dr.Campbell has a “no secrets policy.” Dr. Campbell will assist the clients in being able to communicate to each other and ultimately toward full and appropriate disclosure in the therapy.

Confidentiality: The confidentiality of client information and records received or documented during the course of psychotherapeutic treatment is protected by both the legal and ethical standards pertaining to Marriage and Family Therapy. In general confidentiality is mandated and all conversations and documents pertaining to client history will remain strictly confidential and privacy will be protected by the therapist. Information will not be released to any other individual or organization without the prior written authorization of the client.

However there are legal and ethical regulations that have created certain exceptions which allow for disclosure of information. These include the following situations, but are not limited to these:

1. Suspected child abuse or neglect. If information is obtained during the course of treatment that a minor is or may be the victim of abuse or neglect, this information will be released immediately to appropriate authorities.
2. Suspected elder abuse or neglect. If information related to abuse/neglect of a person 65 or over is obtained during the course of treatment, this information will be immediately released to appropriate authorities.
3. Suspected intention to do serious harm to another person. If intent to harm another person is revealed by the client during the course of treatment, information will be shared as necessary to prevent this harm.
4. Suicidal intent. The therapist may disclose information to others regarding the client’s mental status if suicide or self-harm is determined to be a risk.
5. Court. Disclosures may be compelled by a judge, coroner, arbitrator or others in the legal system.

I have read and understand these policies .

Client Signature

Date