

# **PAM MEYERSON, LCSW**

## **OFFICE POLICIES AND INFORMED CONSENT**

Therapy often leads to a significant reduction in distressing feelings, resolution of specific problems, improved relationships, and better coping skills. You may realize that old patterns, unresolved issues or memories have been preventing you from living life to the fullest. In therapy, you can discover ways to get "unstuck," but while you are doing this work, you may experience unsettling or unfamiliar emotions. When you make changes in your life, your relationships may change too. Those closest to you may be supportive of the changes or may feel unsettled by them. Sometimes your loved ones will have some adjustments to make as well.

My goal for you is to feel better and have the quality of life you really desire. Nevertheless, there are no guarantees. I will be available to help you with issues that arise, but there are some things you can do to get more out of your therapy, such as:

- If you make therapy a priority, the work will progress more quickly. This will mean spending some time outside of the therapy thinking about your work. Your "homework" may involve reading, writing, or other exercises.
- Be patient with yourself. You may have been living with anxiety, sadness, or distress for some time, and it is going to take time to get those issues resolved.
- Feel free to talk with me about any issues that seem to arise because of therapy. When you have trouble with emotions or feel reluctant to come to therapy, it is important for us to discuss these issues so they can be resolved.

## **COMPLETING TREATMENT**

The therapist and the client have an intuitive sense when therapy usually comes to an end. When I begin to recognize this ending as near, I will discuss it with you. If you feel you have met the goals you set out to accomplish, and then please share this with me. We will plan how to address any remaining issues and when to end treatment. Ending therapy is not a casual process and can be some of our most important work. If you decide to end therapy prior to discussing this, then we need to meet at least one more session to review our work to date, our goals and accomplishments, any work left to be done and what options you have at that time.

## **THE LIMITS OF CONFIDENTIALITY**

Communications between a therapist and client are considered "privileged" under the relevant laws of the State of Illinois, which means the content may not be revealed to anyone else without the consent of the holder of the privilege, which is you: the client. However, there are several important limitations on that privilege including:

1. You sign an authorization waiving your rights to confidentiality.
2. The Courts order you for an evaluation, in which case I am required to furnish the Courts with information.
3. Your therapist is subpoenaed in a court proceeding, in which case I may be obligated to surrender clinical case notes. This rarely happens, and would not happen without your knowledge.
4. I am required by law to report any incident of suspected child abuse, molestation, or neglect to relevant authorities.
5. I am required by law to report any incident of suspected elder or dependent adult abuse or neglect or abandonment to relevant authorities.
6. You express your intent to commit suicide or homicide, in which case I am required by law to notify relevant authorities and any potential victims.
7. If you are using insurance, you must sign an authorization for me to contact the insurance company. Insurance companies vary in how much information they require for me to divulge to be reimbursed for services.
8. You are ordered by an agency for an evaluation or treatment that requires the therapist to furnish information back to the agency.

I occasionally consult with another professional about my cases. In these consultations, I make every effort to avoid revealing specific identifiable information about my clients. The consultant is also legally bound to keep information confidential. Occasionally, I write as a professional for publication. In using examples of therapy situations, I do not reveal specifics or identities.

I often communicate with therapy clients by text message, e-mail and other means of electronic communication. All communications remain both privileged and confidential. If a therapy client prefers that I not communicate with them in the aforesaid manner, they should so advise me.

## **FEES AND BILLING**

By entering into therapy, we have begun a professional relationship with financial implications. I am offering my services as a therapist to you on a value-for-value basis. I agree to treat your psychological problems to the best of my professional ability, and in return you agree to pay my fees, and to cooperate with treatment, pending informed consent.

My fees are charged based on each session. I have a discounted rate if you are a self pay client which is decided on a case-by-case basis. I bill insurance my non-discounted rate.

Occasionally, my hourly fees must be raised to cover increased expenses. I will give you sufficient notice prior to any increase.

Payment is due at the conclusion of each session, unless you have made other arrangements before the session. You may pay by check or cash. My fee is \_\_\_\_\_ per hour.

### **APPOINTMENTS AND CANCELLATIONS**

Your appointment is a standing time, reserved for you every week until you finish your therapy. In order to keep this reserved time for you, I will keep a credit card or debit card number on file. If you do not show up or cancel your scheduled appointment with at least forty eight (48) hours notice, the credit card you provide will be charged for your scheduled time. Your credit card information will be kept in your confidential file and not released to anyone. If you need to cancel, please call the office at any time, day or night and follow the voicemail instructions.

\_\_\_\_\_ **You will be charged for missed sessions unless you have forty eight (48) hours advanced notice.**

### **HOSPITALIZATION**

If your psychological problems are severe enough to require hospitalization, I can arrange hospitalization for you. Please discuss with me any feelings that you might have about needing to be hospitalized.

### **MEDICATION**

Sometimes, medications can be beneficial in helping certain psychological conditions. Please feel free to discuss this with me if you feel this may be of help to you or you have questions. While psychotherapists cannot prescribe medications, I do have good, working relationships with several psychiatrists and I can help facilitate this for you.

Again, welcome!! If you have any questions, please feel free to ask. I am here to make your therapeutic experience a positive one. I hope that your time here will be rewarding for you and I will work diligently to help you work towards accomplishing your therapeutic goals.

Please let me know any concerns you have.

### **EMERGENCIES**

I do abide by my 48 hour cancellation policy.

### **PROFESSIONAL SERVICES**

I am a Licensed Clinical Social Worker.

## CONSENT TO SERVICE

I have read and understand the above information, agree to abide by the terms laid out above, and have had the opportunity to ask my therapist any questions I may have.

Signed \_\_\_\_\_ Date \_\_\_\_\_