



11340 West Olympic Blvd.
Suite 203 and Suite 330
Los Angeles, California 90064

Informed Consent Form

Welcome to our office. As therapists, we are governed by various laws and regulations and by the code of ethics of our profession. The Ethics Code requires that we make you aware of specific office policies and how these procedures may affect you. However, many of these policies will be unrelated to the work we do together.

Patient Rights: Our relationship is strictly voluntary and you may leave the psychotherapy relationship any time you wish. Please keep in mind that ending relationships can be difficult and closure is very important when moving on. Given this, we request that you give at minimum two weeks notice so we can conclude with a healthy and positive note.

Limits of Confidentiality: Under most circumstances, all communication between you and your therapist is confidential, unless permission is given by you to convey information to a third party. There are certain exceptions to this:

- When there is a reasonable suspicion of child abuse, dependent-adult or elder abuse.
- When a client threatens violence to an identifiable victim.
- When a client presents a danger of violence to others.
- When a client is likely to harm him/herself unless protective measures are taken.
- When a client states that he or she has downloaded, streamed, or accessed through any electronic or digital media depictions in which a child is engaged in an act of obscene sexual conduct.

In the case of danger to others, we are required by law to notify the police and to inform any intended victim(s). In the case of harm to self, we are ethically bound to inform the nearest relative, significant other, or to otherwise enlist methods to prevent harm to self or suicide. In instances of child abuse, elder abuse, or dependent abuse, we must notify the proper authorities.

Payment & Fees: It is customary to pay for sessions at the time of the session, unless otherwise arranged. Payments must be in full. Acceptable forms of payment are cash and check. Checks should be made payable to Marnie Breecker. If you need to pay by credit card, please discuss with your primary therapist.

Insurance: We will be pleased to sign any insurance forms and/or provide a monthly statement upon request. Please understand that insurance is an arrangement made between your carrier and yourself with reimbursement coming to you whenever provided by your insurer.

Telephone Accessibility & Emergency Procedures: Calls will be returned during your therapist's business hours should you need to contact him/her between sessions. We can not guarantee an immediate return call, although every effort will be made to return calls within 24 hours. Calls received over the weekend will be returned on the following business day. In the event of a lengthy phone session, you will be charged for that session at your standard hourly fee. If you have a true, life-threatening emergency, call 911 for help or go to your local emergency room.

Appointments & Cancellation Policy: Sessions are 50 minutes long. Should you need to cancel or reschedule an appointment, 24 hours notice is required in order to avoid being charged the full fee for the session. This is necessary because a professional time commitment is set aside and held exclusively for you.

I have read, understood, and agreed to the conditions stated above:

Signature

Date

Signature of parent/guardian if patient is minor

Date



The Center for Relational Healing