Carolyn Kelleher, M.A.

Licensed Marriage and Family Therapist License # MFC 34156

INFORMED CONSENT: CLIENT'S RIGHTS

- 1. You have the right to decide not to receive counseling from me. If you wish, I shall provide you with the names of other clinicians
- 2. You have the right to end therapy at any time without any moral, legal or financial obligation for future sessions.
- 3. You have the right to ask any questions about the procedures used during therapy. If you wish, I shall explain my usual methods to you.
- 4. You have the right to prevent the use of certain therapeutic techniques. I shall inform you of any unusual procedures and shall describe any risks involved.
- 5. You have the right to receive a written summary of your treatment at reasonable intervals during your therapy.
- 6. One of your most important rights involves confidentiality. Generally, information revealed by you during therapy will be kept confidential and will not be revealed to any other person without your written permission.

There are certain situations in which, as a Marriage and Family Therapist, I am <u>required by law</u> to reveal information obtained during therapy to other persons or agencies <u>without</u> your permission. I am not required to inform you of my actions in this regard. These situations are as follows:

- (a) If you threaten violence to another person, I am required by law to inform the intended victim and the appropriate law enforcement agencies.
- (b) If you threaten violence to yourself, it is my policy to take appropriate actions to ensure your continuing safety.
- (c) If I am ordered by a court to testify regarding your therapy, I will claim client-therapist privilege. If the judge does not honor this privilege, I will testify.
- (d) If a court orders you to see me for an interview and/or therapy, the results of the interview or treatment may have to be revealed to the court.
- (e) If I have reasonable cause to suspect child abuse and/or if a client reports such to me, I must report that to an appropriate child protective agency. I must do the same for suspected abuse of an elder and/or dependent adult.

Acknowledged copy received:

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Client signature	Date	