

Samuel S. Lample, MA  
Licensed Professional Counselor  
Approved Clinical Supervisor by Arizona Board of Behavioral Health

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**INFORMED CONSENT for TREATMENT AND CONSULTATION**

Informed Consent and Agreement for Psychosocial Assessment, Counseling/Therapy/Treatment and/or Related Professional Services

\*Please initial on the lines provided to indicate that you have read and understood the policies and that you freely and willingly agree to enter into and participate in treatment.

**CONSENT FOR TREATMENT:** I, (Client/Parent/Guardian) \_\_\_\_\_  
\_\_\_\_\_ authorize and request that Samuel S. Lample, MA, LPC. and/or his therapist,  
independent contractor (therapist name), \_\_\_\_\_, to  
provide mental health counseling/therapy services including, but not limited to, diagnostic  
assessment and behavioral health treatment advisable during the course of my care or the care of  
my minor child.

\_\_\_\_\_ (Please initial)

**PATIENT RIGHTS:** Treatment begins with typically one session devoted to a biopsychosocial intake assessment so that Samuel S. Lample, MA, LPC. and/or his therapist, independent contractor can better understand the key issues, your history, and any other factors that may be relevant. When the initial intake assessment process is complete, treatment approaches will be discussed and you will participate in setting therapeutic goals. You and/or your minor have the right and duty to participate in treatment related decisions and treatment planning. You also have the right to refuse treatment or discontinue this consent for treatment, which will include a discussion about the possible consequences of such choices. (See section on Terminating Therapy).

\_\_\_\_\_ (Please initial)

**PSYCHOLOGICAL SERVICES – (Function, Limits and Risks):** Mental health counseling/therapy requires active effort on the part of the client and support system including, but not limited to, a commitment of time and energy, both in and out of session. Since counseling/therapy frequently involves discussion of painful life events, clients may experience uncomfortable feelings (sadness, anger, shame, etc.). The expectation that clients will benefit

from counseling/therapy is reasonable but cannot be guaranteed due to the responsibility of the client to initiate and maintain change. Attempts to address the identified issue(s) that prompted counseling in the first place may result in changes that are unexpected or un-intended.

Mental health counseling/therapy may result in decisions to change various aspects of one's life. Family members or love ones may not necessarily experience such changes as positive. Change will sometimes be easy and swift, but more often than not it will be slow and frustrating.

**MARRIAGE OR COUPLES COUNSELING/THERAPY: In the case of marriage counseling, the possibility of divorce is often a legitimate risk.**

**Couples, married or otherwise defined as a couple, whether legal or by intent, seeking marital or couples' counseling, will have, without exception, a separate chart in the medical record for each individual in the couple. Neither party will have access to the information in their significant other's chart.**

**Furthermore, for marital counseling or couples counseling, any information disclosed by one party outside the presence of the other party will be encouraged to be shared with the other party in the next session, if not sooner, depending upon the nature of the information disclosed and the willingness of the disclosing party to share said information. In other words, neither Samuel S. Lample, nor his therapist, independent contractors want to enable secrecy in any relationship.**

**Unless Samuel S. Lample, or his therapist, independent contractors believe that there is imminent danger to one of the parties, the disclosed information will be processed as referenced above regardless of how the information is attained through individual session, phone call, email or other form of communication. If you have any concerns about this section of the consent please discuss them with Samuel S. Lample and/or his therapist, independent contractor before coming to the first session.**

\_\_\_\_\_ (Please initial)

**APPOINTMENTS AND CANCELLATIONS: Mental health counseling/therapy appointments are, on average, 50 to 75 minutes in length and include assessment/treatment and the handling of all administrative details related to the case (i.e. scheduling). Please note that the scheduling of an appointment involves the reservation of time specifically for said client, Samuel S. Lample, MA, LPC or his therapist, independent contractors. **All cancellations/appointment changes must be made with at least a 24-hour advance notice to Mr. Lample or a designee. All cancellations/appointment changes with less than a 24-hour notice will be charged a fee appropriate to the amount the client would pay for his/her session. *Last minute cancellations are not honored, save for an unforeseen emergency. Finally, 24-hour notice*****

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*does not apply to weekends or holidays.* If the client is unable to attend the scheduled appointment in person, the client may opt for a phone or videoconference session if the therapist, independent contractor can accommodate during the scheduled time although it should be noted that insurance companies might not cover these types of sessions. Originally scheduled phone or videoconference sessions are treated as regular appointments in that the same cancellation policy applies.

If you miss a scheduled appointment for any reason, and fail to call the office or your therapist, independent contractor within 30 days to reschedule, that will be considered a termination of this agreement and the medical record will be closed.

\_\_\_\_\_ (Please initial)

**REGULAR OR EMERGENCY CONTACT:** Samuel S. Lample, MA, LPC and his therapist, independent contractors are not immediately available by telephone due to being in session and because this is an outpatient level of care. Clients may leave a confidential voicemail or send an email. Every effort will be made to return calls within two business days, with the exception of weekends and holidays. Samuel S. Lample and his therapist, independent contractors maintain healthy boundaries with their clients by communicating with clients during established work hours and are not on call 24 hours a day, 7 days a week. **If an emergency/crisis arises, please call 911, the Empact crisis line at 480-784-1500 or go immediately to the closest emergency room.**

\_\_\_\_\_ (Please initial)

**EMAIL/ELECTRONIC COMMUNICATION:** Please be advised that any communication delivered and/or stored electronically (via computer/email/fax) may not be completely secure and could result in unforeseen limits on privacy. In addition, email and other forms of electronic communication may at times be added to the electronic medical record.

\_\_\_\_\_ (Please initial)

**MINORS:** If a client is under eighteen years of age, please be aware that the parents/guardian are not entitled to receive updates on the client's treatment though they may request updates that do not undermined the client's confidentiality or threaten the therapeutic relationship. The client will be made aware of these updates, unless doing so poses possible harm. In addition, in cases in which the minor has biological parents who are not currently married but do share parenting rights, both parents must sign this consent form before therapy can begin and a copy of all custody related paperwork must be provide before the first session.

\_\_\_\_\_ (Please initial, if the patient is a minor.)

**CONFIDENTIALITY:** In general law protects the privacy of all communication between a client and a counselor/therapist, including that of a minor. Samuel S. Lample, and his therapist, independent contractors are not at liberty to release information to another professional or interested party without written permission except where disclosure is permitted or required by law. There are some situations in which Samuel S. Lample, and his therapist, independent contractors are legally obligated to take action to protect clients or others from harm, and therefore there are occasions when confidentiality can and must be limited.

**\*PLEASE PAY ATTENTION TO THE FOLLOWING.** Disclosure of otherwise confidential information may be required in the following circumstances:

(1) When there is a reasonable suspicion of child abuse (sexual, emotional, physical or neglect), elder abuse, or abuse of a dependent adult. In this situation Mr. Lample and his therapist, independent contractors are required by law to file a report with the appropriate state agency. There is no time limit on child abuse reporting. In the event that an adult patient reveals he/she was abused as a child, a report may be filed if there is reason to suspect the abuser still has the capacity to victimize a minor. As mandated reporters Mr. Lample and therapist, independent contractors are not given the latitude to determine what is or is not abusive. If a minor child reports that he/she is being or has been abused in any way a report will be made to the appropriate state agency. If a report is made, there is no obligation to notify parents/guardians of said report.

(2) If Mr. Lample or his therapist, independent contractors have reason to believe that a client is threatening serious bodily harm to an *identifiable other*, they are required to take protective actions. These actions may include notifying the potential victim, contacting the police, and/or seeking hospitalization of the client.

(3) If the client threatens serious bodily harm to herself/himself, Mr. Lample and his therapist independent contractors must take action to protect the client including, but not limited to, establishing a *Suicide Prevention Contract*, contacting the client's emergency contact/family member, and/or seeking hospitalization. Only the minimum amount of information will be shared to the keep the client safe.

(4) When the court, not a lawyer, issues an order to provide testimony or produce documents, and attempts to have the order modified or vacated have been unsuccessful, Mr. Lample or his therapist, independent contractors must comply with the order to avoid being held in contempt of court.

Finally, by signing this consent you are agreeing to refrain from audio or video taping any interactions with Samuel S. Lample, and/or his therapist, independent contractors. Audio or video taped sessions held by clients cannot be guaranteed to remain confidential. This consent can be adjusted through written authorization signed by all parties involved. Keep in mind, that as part of the clinical supervision process, Samuel S. Lample and the Arizona Board of

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Behavioral Health Examiners require live supervision of his therapist, independent contractors from time to time which include audio and video recording of sessions long enough to process the contents of the session in supervision at which point the recording are deleted. The therapist, independent contractors will request permission from the client to record a session.

\_\_\_\_\_ (Please initial)

**PROFESSIONAL CONSULTATION:** Samuel S. Lample, and/or his therapist, independent contractors may occasionally consult with another professional regarding a client's case. During a consultation, identifying information about the client *will not* be revealed. The consultant is also legally bound to keep the information confidential and the client, parent or guardian will be notified in the case that consultation is required.

\_\_\_\_\_ (Please initial)

**TERMINATING THERAPY:** Treatment is typically terminated when it becomes reasonably clear that the client no longer needs care. In general, therapy sessions are tapered down gradually (i.e., weekly to bi-weekly, then monthly, etc.) with the knowledge and cooperation of the client. Samuel S. Lample and his therapist, independent contractors reserve the right to discontinue the therapeutic relationship if they believe that they are unable to provide effective treatment given the unique needs of the client. Therapy may also be terminated if a client consistently refuses to follow recommendations that are critical to maintaining safety and/or standards of care (for instance, recommendations to HLOC or medical evaluation). Samuel S. Lample, and/or his therapist, independent contractors may terminate therapy if threatened or otherwise endangered by the client or one having a relationship with the client. Whenever possible, pre-termination counseling and suggested alternative providers will be offered.

\_\_\_\_\_ (Please initial)

**CLIENT-THERAPIST RELATIONSHIP:** The client-therapist relationship is limited to being professional and therapeutic. It is rarely, if ever appropriate, for the client and therapist to spend any time together outside of session. This boundary is established so that roles are clearly defined to ensure professionalism and confidentiality are maintained.

\_\_\_\_\_ (Please initial)

**LETTER REQUESTS:** No letters pertaining to treatment recommendations, prognosis, diagnosis or opinions of a clinical nature shall be written for any reason as neither Mr. Lample, nor his therapist, independent contractors are not considered to have expert opinions by the court system. In addition, there will be a \$25.00 fee for letters that written about other subject matter. \_\_\_\_\_ (Please initial)

