CONFIDENTIALITY POLICY

Content of all our therapy sessions are considered to be confidential. Both verbal

information and written records about you cannot and will not be shared with another party

without your written consent. Noted exceptions of this policy are as follows:

**Suicide/Homicide**

If during our work together you disclose active intentions or a plan to harm another person, I will need to warn the intended victim and report this information to legal authorities.

In addition, if you disclose or implies a plan for suicide, I am required to notify legal authorities and make reasonable attempts to notify your emergency contact.

**Abuse of Children and Vulnerable Adults**

If during our work together you state or suggest that you are abusing a child (or vulnerable adult) or have recently abused a child (or vulnerable adult), or a child (or vulnerable adult) is in danger of abuse, I am required to report this information to the appropriate

social service and/or legal authorities.

**Legal**

Information may have to be released in response to a subpoena from a court. If records are subpoenaed I will take all efforts to squash the subpoena prior to release of your personal information.

**\*\*Information that may be requested in any of the above limits includes: type of services,**

**dates/times of services, diagnosis, treatment plan, and description of impairment, progress**

**of therapy, case notes, and summaries.**

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Signature Date