



SUSAN HYATT-BIRNHOLZ  
MARRIAGE AND FAMILY THERAPIST

(615) 905-6094

**Consent for Treatment:**  
**Confidentiality and Fee Structure**

As your therapist, I look forward to working with you. This consent form will provide a clear framework for our work together and will facilitate our working relationship. Please feel free to discuss any questions you have with me.

**1. Confidentiality**

As your therapist, I am legally prohibited from revealing that you are in treatment with me, nor can I reveal what you have said to me in any way that identifies you without your written permission. However, in the following instances, your right to confidentiality must be set aside as required by law or professional guidelines:

**A.** Instances of actual or suspected physical or sexual abuse, emotional cruelty, or neglect of a child or an elder or dependent adult must be reported to the appropriate protective services.

**B.** If I have a reason to believe that a client poses an unavoidable and imminent danger of violence to another person (or to another's property), I must warn whomever may be in danger, and I must notify the appropriate authorities.

**C.** If a court has ordered your treatment with me, or if I am served with a subpoena. For example, in the context of a legal proceeding in which you raise your own psychological state as an issue, I am required to release information to the court, or may have to appear in court.

**D.** Finally, if you, as a client, reveal a serious intent to harm yourself, I am ethically bound to do what I can to help you keep safe, which may involve notifying others who may be of help.

*\* In all of the above cases, it is incumbent upon me to release only that information necessary to appropriately carry out my responsibilities -- your confidentiality still remains an ethical priority.*

**2. Session Fees and Payments**

Therapy is paid for on a monthly subscription plan, either weekly, biweekly or a once a month maintenance plan (for those you are ready to exit therapy). When you first start therapy, you will be on a weekly plan. Session payments cost \$125 a session and will be made in advance due on the first of the month via credit card on my website for the agreed total amount for the month. If you are receiving a reduced rate because of proven financial hardship then you will still be charged your agreed monthly charge regardless of any cancellations, this excludes holidays or if the office is closed. This monthly subscription ensures your reserved space in therapy. Your weekly appointment time is reserved for you. Therapy sessions are 50 minutes long and they will start and end promptly. Appointment cancellations must be made 24 hours in advance, otherwise, you will still be charged. Fees may change over the course of treatment, typically raised once yearly. Fees for writing a psychological report or court appearances will be negotiated separately.

**3. Couples Counseling**

When therapy is being conducted with a couple on an ongoing basis, it can be counterproductive to the therapy process for the therapist to have information or private communications from one member of that couple, which are not known to the other member. Therefore, both partners must be present for the session to occur; a no-show or late cancellation by one member will be billed in full, if the single member is seen alone then the next session the partner will have an individual session before the couple can be seen together again.

**4. Accessibility**

Therapist will return calls as soon as possible should you need to speak to me between sessions. I do not charge fees for telephone consultations that are less than 10 minutes. Consultations of longer than 10 minutes will be pro-rated to the nearest quarter-hour, based on your hourly fee.

**5. Emergencies**

I understand that Susan Birnholz, MFT does not work on an emergency basis and does not carry a pager. If an emergency situation arises, I know that I should call 911 or go to the nearest hospital emergency room. Phone calls between sessions are typically limited to scheduling and other logistical matters, which must be arranged before the next session. If you encounter a serious psychological crisis between sessions and do not have a session scheduled in the next 12 hours, you will be encouraged to schedule one. The reason for this is that scheduled, in-person sessions, where the therapist has the time set aside for you, are the most effective way to obtain assistance. If there is a life-threatening psychological emergency and Susan Birnholz, MFT does not have an appointment available in the next 12 hours, a brief telephone consultation may be provided to assist you until the next available appointment. Such crisis consultations are charged at the standard fee, pro-rated to the nearest quarter-hour. Please note that most insurance carriers will not reimburse for telephone consultations.

**6. Patient Rights**

In addition to confidentiality, as spelled out above, you have the right to end your therapy at any time, for whatever reason, without any moral, legal or financial obligation, except for fees already incurred. You have the right to question any aspect of your treatment, and to expect that I will work with you to meet your needs for adjunctive or alternative treatment. You also have the right to expect that I will maintain professional and ethical boundaries by not entering into other personal, financial, or professional relationships with you, all of which would greatly compromise our work together.

Psychotherapy involves a partnership between therapist and client. As your therapist, I will contribute knowledge, skills, and a willingness to do my best. The determination of success, however, will ultimately depend upon your commitment to your own personal growth and care. Your signature below indicates that you have read and understand this information, and have received a copy of this consent form.

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Print Name of Client	Signature of Client/Responsible Party	Date
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