



Tami Applegate, MS, MFT

CONSENT TO TREATMENT

I want to personally welcome you to my counseling practice. I am a licensed Marriage and Family Therapist in the State of Nevada. I provide psychotherapy to adults and adolescents seeking individual counseling. Marriage and Family Therapists provide care to persons with mental and emotional difficulties of varying intensity. These difficulties may result from physical disease, emotional stress, grief, bereavement, family dysfunction and other traumas. As a therapist it is my role to assist clients with understanding, explaining and alleviating the cognitive, emotional and behavioral distress described by the client. Please take a few minutes to read about information regarding therapy. If you have any questions, please ask at any time.

Thank you,

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1. Treatment:

Treatment begins following an initial assessment. The first several sessions are used to gather additional information to develop an appropriate treatment plan including recommended therapy interventions, treatment approaches and how often services are recommended. This plan is formulated according to the nature and intensity of the problems you present. Therapy is not like visiting a medical doctor. It requires your active involvement and best efforts to change thoughts, feelings and behaviors. If it is assessed that I cannot adequately meet your treatment needs, you will be provided referrals for other community agencies and/or private mental health practitioners who may better meet your needs. Treatment is most often terminated by mutual agreement. You may discontinue treatment at any time by informing me that you wish to terminate treatment. If you do not show for more than two consecutive sessions, I will assume that you no longer desire treatment and close your case.



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2. Appointments: You may call the office to schedule, reschedule or cancel an appointment. **If you cancel with less than 24 business hours notice or no show for an appointment, you will be assessed an \$80.00 cancellation fee.** If you miss your appointment, your session time will be made available for another client.

3. Fees: Payments for therapy services are based on rates of 45 or 60 minutes and are due prior to each session. The following is my list of fees per session:

Intake evaluation: \$ 225.00

Individual/family therapy 60 minutes: \$225.00

Individual therapy 45 minutes: \$175.00

Crisis services: \$250.00

Legal Actions: \$350.00 an hour

Although you may wish to use insurance to cover your treatment, you will still be responsible for any services not covered fully by your insurance or those denied by your insurance. You have the responsibility to pay for any services received before you terminate your treatment. If the account is unpaid I may 1) terminate sessions and provide you with a referral; 2) charge balance due to the credit card on file; 3) commence a legal case; or 4) decide to send the outstanding balance to collections after 90 days of being past due.

If there is any time spent for legal actions you will be billed at a rate of \$350 an hour for any paperwork, speaking to an attorney, court appearances, travel time, and any and all other preparations of any kind. If your court case involves a partner that has been seen in treatment with you, you must have a written release from that person in order for me to disclose information.

4. Confidentiality: A record of all treatment sessions are kept. This information is confidential. Under Nevada State Law, you have the right to access the information in your medical records. Information about your treatment cannot be shared with anyone (e.g., insurance companies, attorneys, physicians, family members and others) without your written consent. However, certain laws and ethical standards limit



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confidentiality of treatment information. As a MFT I am required to report suspected incidents of child and elder abuse (sexual, physical, neglect) to Protective Services and/or law enforcement authorities. I may also breach confidentiality if you are a danger to yourself or others. I may talk about you to other professionals in two instances. If I am scheduled to be away from the office for a vacation, I may have a trusted colleague cover for me in instances of emergencies. I will tell them only what they need to know should you have an emergency while I am gone. Of course, this therapist will be bound by the same laws regarding confidentiality that I am. Secondly, I sometimes consult with colleagues about my clients to better meet the therapeutic needs. In these case staffings, your name will not be used. Only pertinent information will be shared. Except for these situations that I have described above, my colleagues and I will always maintain your privacy.

5. Risks/Benefits: Therapy has been demonstrated to help many individuals. Therapy is most effective when you follow through on any “homework” assignments or any other activities that we agree might be helpful. One of the primary risks of therapy is the fact that change sometimes comes quick and easy, but most often is slow and frustrating. Another risk of therapy is that the process may include discussing problems or events that may evoke unpleasant feelings. If this occurs, please inform me immediately so that these feelings may be addressed in a timely and appropriate manner.

In order for therapy to be most effective, weekly appointments are usually necessary. One risk of not keeping appointments is that regression may occur during the period you are away from therapy. I encourage all my clients to do everything they can to keep scheduled appointments. As progress is achieved, treatment will be slowly phased-out. Sessions may be cut back to once every other week, then to once a month, etc.

6. Emergencies: In the case of an emergency occurring during normal business hours, you may call and indicate the nature of the crisis. A session will be scheduled as soon as possible if needed. Phone consultations are charged at a prorated rate of \$250.00 an hour. If you have an emergency that occurs after regular business hours you may call 911 or any psychiatric facility that provides 24-hour crisis assistance. If I am unavailable (due to



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illness or scheduled vacation) your treatment records may be made available to another mental health professional of similar training who will assist you.

7. The Therapeutic Relationship:

As a professional I will use my best knowledge and skills to help you. This includes the rules and standards of the Marriage and Family Therapists (MFT) Board. In your best interests the MFT Board puts limits on the relationship between a therapist and a client, and I will abide by these limits. Therefore, it is important for me to explain these limits so you will not think they are personal responses to you. State laws and rules of the MFT board require me to keep what you tell me confidential. The limits of confidentiality were explained earlier in this document. However, this also means that if we were to meet you on the street or socially, I may not say hello. This is not a personal reaction to you; rather it is a way to maintain the confidentiality of our relationship. Even if you invite me, I cannot attend your family gatherings, including weddings, baby showers or the like. As a therapist I will not give you gifts, and I may not receive gifts. I can only be your therapist. I cannot be a close friend, have a romantic relationship, or conduct any other business other than therapy with my clients. Dual relationships are not permitted.

My signature below indicates that I have read and understand the nature and limits of the services provided. I agree to voluntarily participate in therapy services.

Signature of Client or Guardian

date

Signature of Therapist

date