## Bohne G. Silber, Ph.D. Licensed Psychologist

## **Outpatient Service Contract**

Welcome to my practice. This document contains important information about my professional services and business policies. Please ask me about anything you do not fully understand. Once you sign this document, it is a binding agreement between us.

## **Benefits and Emotional Risks**

The majority of people who obtain mental health services benefit from the process but there can be some risks. Risks may include recalling unpleasant memories or discussing painful aspects of your life; hence, you may experience uncomfortable feelings such as sadness, anger, anxiety or guilt. Therapy can lead to a significant reduction in distress, may address particular problems, and may improve relationships but these are not guaranteed outcomes. After the first session, we will work together to identify your treatment goals and I welcome your feedback and active participation throughout the process.

### Confidentiality

A patient's confidentiality is extremely important and is legally protected. In most cases, your confidentiality will be strictly guarded. However, special circumstances may limit a patient's right or ability to maintain confidential communications. Confidentiality must be broken if: 1) I believe that you are in immediate danger of hurting or killing yourself; 2) I believe that you are going to hurt or kill another person; 3) I have reason to suspect that a child or vulnerable adult has been subjected to physical or sexual abuse or neglect. By law, I am mandated to report abuse of a child, elder or disabled person; 4) I have been ordered to testify or relinquish records by the court. Finally, if you are a minor (age 17 or under), any information that you share with me that reveals that you are putting yourself at risk must be shared with your legal guardian.

#### **Payment and Fees**

Payment should be made at the time of service.

#### Session Fees are as follows:

Couples Therapy Sessions (50 minutes) - \$200 No Show / Late Cancellation fee - \$75 (require 48 hours' notice to avoid cancellation fee)

#### **Payment Options:**

Zelle – send to 410-978-3466 Venmo – send to @bohne-silber Credit Cards accepted but 4.25% is added to offset the processing company transaction fee.

#### **Contacting Me**

If I am not able to answer the phone because I am in session or not immediately available, please leave a message on my confidential office voicemail and I will usually return your call

within 24 hours. In cases of life threatening emergency or psychiatric emergency, please call 911 or go to the nearest hospital emergency room.

# Authorization/Agreement

By signing this contract, you agree that you have reviewed this information and agree to these terms.

Signature

Printed Name

Date