

Professional Disclosure Statement

Samantha Garfinkel LMFT
Licensed Marriage and Family Therapist
CA LMFT #112202 and OR # T1719
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Philosophy and Approach:

I approach sessions with multiple therapeutic approaches; it is active and involved. I bring unconditional positive regard, with active listening and seek to understand my clients' struggles and collaboratively develop goals and a process to achieve your goals.

Formal Education and Training:

I hold a bachelor's degree in communication from California State University Channel Islands and a master's degree in counseling psychology from California Lutheran University. Major coursework included: theories, human growth/development, gender/sexuality, law/ethics, research, attachment, counseling techniques when working with adults, adolescents, children, couples, and/or families, etc.

Fees:

My fee for Individual sessions is \$150.00 for a 54-minute session, I do offer a sliding scale of \$110.00 to \$150.00 based off my availability for lower fees (I accept a limited amount) and \$175 for Couples sessions and \$200 for Family sessions. I can provide a superbill for out-of-pocket payments for clients to have reimbursement from their insurance company. I am currently accepting insurance, please visit my website at samanthagarfinkelmft.com for information.

Social Media and Meeting Outside the Office:

To protect your privacy and mine, I do not accept friend requests on social media platforms (Facebook, Instagram, TikTok, LinkedIn, etc.). The information you share with me will be regarded with respect and handled in a professional manner. If we happen to run into each other outside of the counseling setting, I will not approach/acknowledge you first. Again, this is to protect your privacy.

As a client of, you have the following rights:

- To expect that a licensed clinician has met the qualifications of training and experience required by state law;
- To examine public records maintained by the Board and to have the Board confirm credentials of a registered associate;
- To obtain a copy of the Code of Ethics;
- To report complaints to the Board;
- To be informed of the cost of professional services before receiving the services;
- To be free from being the object of discrimination on any basis listed in the Code of Ethics while receiving services;
- To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions:
 1. Reporting suspected child abuse;
 2. Reporting imminent danger to you or others;
 3. Reporting information required in court proceedings or by your insurance company, or other relevant agencies;
 4. Providing information concerning licensee case consultation or supervision; and
 5. Defending claims brought by you against me.

As a Licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics To maintain my license I am required to participate in continuing education, taking classes dealing with subjects relevant to this profession.

You may contact the **Board of Licensed Professional Counselors and Therapists** at:

3218 Pringle Rd SE, #120, Salem, OR 97302-6312

Telephone: (503) 378-5499 **Email:** lpct.board@oregon.gov **Website:** www.oregon.gov/OBLPCT

For additional information, consult the Board's website.

Emergencies:

If you have a mental health emergency, you or your family members should contact your family physician or call one of the following community services for immediate assistance:

9-1-1, Jackson County HHS Crisis Hotline (541) 774-8201, Help Line at (541) 779-4357, or go to the nearest hospital emergency room.