

CATHERINE TAYE SLATTERY - LOUISVILLE ROLFING - INFORMED CONSENT

PROCESS AND SCOPE OF PRACTICE

I am Certified Rolfer®, Rolf Movement Practitioner, and Somatic Experiencing® Practitioner. My work is influenced by a number of movement and somatic perspectives, all of which help people understand their bodies, injuries, emotional lives, relationships, illnesses and personal dynamics as part of their healing process. My focus is on wellness, and my areas of expertise include pain, musculoskeletal problems, anxiety and stress related problems, and trauma issues.

My primary modality is Rolfing Structural Integration—a holistic form of bodywork that aims to improve posture, flexibility, and overall body function by balancing the fascial system, improving movement patterns, and increasing body awareness. Rolfing happens through direct, thorough, detailed, hands-on contact with your body, and through movement education.

For my clients with a trauma history, I have additional training in a body-based approach to the resolution of trauma, Somatic Experiencing. SE uses touch, movement, and conversation to help resolve trauma held in the nervous system. As a bodyworker, I can help people with mild to moderate traumatic experiences and symptoms.

You have the choice of working exclusively with Rolfing, or exclusively with Somatic Experiencing, or of integrating them. What we do in your sessions will depend on your situation, and on your preferences for your sessions. You have the right to refuse any technique, touch, or inquiry I may use or suggest.

While it is impossible to predict the exact outcomes of somatic work, we will work together toward the goals that we establish. In addition to the work we do together in my office, I may suggest things for you to do between sessions. The frequency and number of sessions will depend upon your needs, scheduling and the severity of your troubles.

I aim to work in a way that helps you feel better, physically and emotionally. However, it is important to know that the pathway to wellness can go through uncomfortable emotions, sensations and states, and, like any other treatment, there can be unintended negative “side effects.” Please let me know if any part of your session feels unwelcome or unwanted in any way, so I can make adjustments. Physical touch can range from very light to steady and firm, and should always feel truly welcome and wanted. Your feedback is very important.

CONFIDENTIALITY

I regard the information you share with me with the greatest respect. I will maintain confidentiality and privacy of your treatment, unless you give me expressed authorization to do otherwise. I consult regularly with other professionals regarding clients I work with; however, a client’s identity remains completely anonymous and I fully maintain confidentiality.

FEES and PAYMENT

Payment is due at each session by cash, check, Venmo or credit card. I do not participate with insurance companies. I can take HSA cards if your plan allows. My fees are \$180 for 75-90 minute session, and \$144 for for a 60 minute session, if paying with cash, check or Venmo. Credit card payments have an added \$3-\$5 fee.

HYGIENE

Please arrive clean for your bodywork sessions. I appreciate good hygiene, and dried sweat can interfere with my contact with your skin. Try to avoid slippery lotions on the day of your session.

MISSED APPOINTMENT/NO SHOW/LATE CANCELLATION & ILLNESS

Please don't come in if you have a cold, or any other illness, including rashes. I won't be able to work with anyone who arrives with symptoms of any kind. Getting bodywork while you are ill, even if it's mild or "almost over," can be detrimental to you, and I am cautious about my exposure to illness. "Symptom-free" is my guide for when it is safe to have a session (not "not-contagious"). If you aren't sure, let's talk about it—contact me and we'll figure it out.

_____ (please initial here)

I charge in full for missed appointments and appointments not cancelled within 24 hours of scheduled time. I don't charge a cancellation fee for unavoidable and unforeseeable situations (like emerging illness or inclement weather), provided you give me as much notice as you can, and reschedule the appointment. _____ (please initial here)

While I require only 24 hours notice, I appreciate as much time as you can give me. Kindly let me know about any schedule changes at your earliest possible convenience. Cancellations close to the 24 hour mark should be infrequent. And, as always, if there are extenuating circumstances, please contact me and we'll figure it out.

EMAIL/TEXTING, EMERGENCIES and VACATION

I usually reply to texts, phone calls and emails within 1 business day. If I am on vacation or at a training, I may not respond until I return to the office. I am not an emergency practitioner, and am not reachable by phone after business hours.

ETHICS

I abide by the Codes of Ethics and standards of practice of The Rolf Institute. You can find the specifics at https://rolf.org/ethics_standards_of_practice.php.

Thank you for asking me to help you. It is a privilege of working with you. Please ask me any questions you have as you move through your healing journey.

I have read the informed consent, and will ask any questions I have about it.

Client Name (print)	Date	Signature
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(If applicable) Parent or Guardian (Print)	Date	Signature
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