

**Daniela Walder, PSY.D.**  
**Clinical Psychologist, PSY 0810005677**

**INFORMED CONSENT TO RECEIVING PSYCHOTHERAPY**

Welcome to my practice. As a licensed clinical psychologist, I am governed by various laws and by the code of ethics of my profession. The Ethics Code requires that I make you aware of specific office policies and how these procedures may affect you. However, many of these policies will be unrelated to our work together.

**Nature of the Service**

I understand that I am consulting with Daniela Walder, Psy.D., a clinical psychologist (license number 0810005677), for psychological services. I understand that it is intended to reduce or eliminate psychological symptoms and improve occupational and social functioning. There are other forms of treatment available, including provision of medication, performance of certain forms of physical exercise, and other interventions that may be quite helpful in alleviating emotional distress. This psychological intervention often leads to substantial improvement, but the process itself may be uncomfortable at times, i.e., experience of painful feelings, decisions made to change relationships or occupational situations, etc. I am aware of these potential benefits and risks and consent to treatment.

**Services Offered**

Individual Psychotherapy, Group Therapy, Consultation and Supervision for Therapists.

**Professional Training**

California School of Professional Psychology, Alhambra (California).

2001- Doctorate in Clinical Psychology

1999- Masters in Clinical Psychology

**Dual relationships**

A "dual relationship" in therapy refers to when the therapist has more than one role with the patient. For example, while we establish a friendly working relationship, I cannot be your "friend" or see you outside of our sessions. Our relationship will hopefully become warm and close, but it will be about you and helping you. It will not feel mutual in a way it would be with a friend, in that I will not mention details of my personal life. Most importantly, avoiding dual relationships helps you feel more safe and open to be honest with me.

**Confidentiality**

All Information revealed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your written permission, except where disclosure is required by law. Most of the provisions explaining when the law requires disclosure were described to you in the Notice of Privacy Practices that you received with this form. Case material may be discussed with another colleague or in the context of ongoing educational and

teaching activities, but only when personal information regarding the patient is so altered as to render the patient unidentifiable.

Some of the circumstances where disclosure is required by the law are: where a patient presents a danger to self, to others, to property, or is gravely disabled.

Disclosure may be required pursuant to a legal proceeding. If you place your mental status at issue in litigation initiated by you, the defendant may have the right to obtain the psychotherapy records and/or testimony by Dr. Walder. Dr. Walder will use her clinical judgment when revealing such information. Dr. Walder will not release records to any outside party unless she is authorized to do so by all adult family members who were part of the treatment.

In the case of my death or disability, my colleague, Dr. Cynthia Wong, would obtain access to my files and let you know of any event that has made it impossible for me to contact you. They may only obtain access in case of such an emergency and they are bound to the same ethical guidelines regarding privacy and confidentiality as I am.

### Children and Adolescents

Parents or guardians of children will most often be involved in the treatment.

When working with children and adolescents under 18, parents/ guardians do have a right to be informed about treatment. In some cases when working with adolescents it is best to provide the teenager with as much privacy as possible. There may be times when it would be helpful for me to talk with guardians/ parents without the teenager present, but parents and guardians should not expect regular reporting or reporting of session content from me. It will have to be left to my judgment what information should be disclosed to them. If the person is under 18 and I found out that there was dangerous behavior that could threaten the teen's life (e.g., heavy drug use, a serious eating disorder, unprotected sexual activity, serious problems at school, etc.) or a severe threat to health, I will divulge this to parents or guardians. If a person is over 18, they are guaranteed the same privacy as adults, regardless of who is paying for treatment.

### Contacting me

I can be reached at (310) 228-8383. If I am free and it is during business hours, I will answer the telephone myself. Usually you will reach my voicemail. I return calls between the hours of 8am and 8pm. If I do not return your call by 8pm, I will return your call the next morning. Please avoid using e-mail, text messages or faxes to communicate with Dr. Walder. Please only use the phone number listed above to communicate with Dr. Walder.

### Emergencies

If you are calling regarding an emergency, please leave a message indicating so at (310) 228-8383 I will make every effort to get back to you within the day of your call. In the unlikely event that you cannot reach me, contact your family physician or your local emergency room and ask for the psychologist or psychiatrist on call or dial 911. If there is an emergency during our work together, or in the future after termination, where I become concerned about your personal safety, the possibility of you injuring someone else or about you receiving proper psychiatric care, I will do whatever I can within the limits of the law to prevent you from injuring yourself or others and to ensure that you receive the proper medical care. For this purpose, I may also contact the person whose name you have provided on the biographical sheet.

### Confidentiality of E-mail, Cell Phone and Faxes Communication

It is very important to be aware that e-mail and cel phone communication can be relatively easily accessed by unauthorized people and hence, the privacy and confidentiality of such communication can be compromised. Please notify Dr. Walder at the beginning of treatment if you decide to avoid or limit in any way the use of any or all of the above-mentioned communication devices.

### Professional Records

Information revealed within sessions will remain confidential unless disclosure is required by law (e.g., where there is reasonable suspicion of child, dependent, or elder abuse, when the patient is of danger to others, or when the patient is likely to harm him or herself unless protective measures are taken). If there is ever a time when you enter your emotional status as an issue in a legal proceeding (i.e., child custody evaluation, workman's compensation claim, etc., then you may be waiving your right to the confidentiality of this relationship. Both Virginia Law and the standards of my profession require that I keep appropriate records of services provided. The confidentiality of these records is closely safeguarded Case material may be discussed with another colleague or in the context of ongoing educational and teaching activities, but only when personal information is altered as to render the patient unidentifiable.

### Litigation Limitation

Due to the nature of the therapeutic process and the fact that it often involves making a full disclosure with regard to many matters which may be of a confidential nature, it is agreed that should there be legal proceedings (such as, but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you, the attorney, nor anyone else acting on your behalf will call on Dr. Walder to testify in court or at any other proceeding, nor will a disclosure of the psychotherapy records be requested.

### Payment for Services

The fee for outpatient psychotherapy is \$180.00 per session, unless otherwise arranged. Delinquent accounts will be referred for collection. Patients are expected to pay for services at the time they are rendered. There will be a \$10.00 charge on returned checks from the bank. Please note that I raise my fee every January. I suggest that you consider your mental health to be as important as your physical health. Therapy can add up, but not getting treatment has greater costs to health and your life.

### Appointments

The standard session is 45 minutes. Appointment times reserve office space and my time. **If you cancel an appointment with less than 24 hours notice, the full fee of \$180.00 will be charged to the patient.**

### Vacations

I generally take between four to six weeks of vacation during the year. I will give you advance notice as to when I will be away. Whenever I am on vacation or unavailable for some other reason, you will be informed in advance if possible and you will be able to reach an on-call therapist if an emergency should occur. That person's name and number will be accessible by calling my voicemail while I am unavailable. In the event of a lengthy telephone session, you will be charged at the hourly session fee.

Release of Information

Should I be required to communicate with a third party regarding the confidential treatment relationship, i.e., an attorney, a judge, or school, or other institution, then a separate "Release of Information" form will be provided and signed by the patient before any such exchange or information occurs.

Dr. Walder's Copy

Your signature on this form acknowledges that I, Dr. Daniela Walder, discussed this information sheet with you as well as elaborated further on my business policies, limits of confidentiality, and nature of the treatment process. Your signature also indicates that you have read and understood this document as well as the HIPPA Notice of Privacy Practices and have also been provided with a copy.

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Name (printed)

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Signature Date



