INFORMED CONSENT FOR PSYCHOTHERAPY and/or PSYCHOLOGICAL EVALUATION

Please read the following carefully and sign the last page indicating that you have read and understand the information provided.

Introduction
The University of the Cumberlands (UC) - Psychological Services Clinic (PSC) is operated by the Ph.D. program in Clinical Psychology (CPP) as a training clinic for UC doctoral students in the CPP. Services are provided primarily by doctoral students in the CPP (trainees) and clinical supervision provided by faculty in the CPP who are all licensed psychologists in the Commonwealth of Kentucky. In some limited cases, licensed faculty may also provide direct services. All services are provided in accordance with the American Psychological Association (APA) Code of Ethics as well as applicable state and federal licensure laws.

Mission Statement
The mission of the PSC is to provide: 1) affordable, quality, evidence-based psychological services to the local community and UC students residing in the NKY area; 2) excellent clinical training and professional development opportunities for doctoral students in the CPP and 3) research opportunities for faculty and students in the CPP.

Scope of Practice
The PSC adheres to a scope of practice within the training, experience, expertise, and availability of resources of trainees and faculty. If at any time, issues presented by the client extend outside of the scope of available services, appropriate referrals will be provided. Clients will then be expected to follow-up with the community provider. Categories of individuals who, in general, are considered to be inappropriate for the PSC and are not accepted unless approved by the Clinic Director include (but are not limited to) those in need of:

- Emergency services, protective services, and/or hospitalization (includes those who evidence psychotic or other emergent symptoms such as suicidality or homicidality)
- Substance abuse detoxification, other medical attention related to substance use or abuse, and/or intensive outpatient services
- Hospitalization related to chronic mental illness
- Psychiatric services (includes individuals appearing to need medication services as their primary form of treatment; does not include those who may benefit from a referral to a medication provider as an adjunct to psychotherapy)
- Legal assistance or assessment (includes those who are likely to be involved in a court appearance as well as parents or children involved in child custody disputes)
- Medical services or evaluation related to disorders or symptoms such as eating disorders or self-injury
- Social Security or Vocational Rehabilitation evaluations
- Psychological assessments needed for child custody and/or forensic purposes

Client Screening
All potential clients are screened for appropriateness through a phone screening process and either assigned to a PSC clinician or referred to another agency/provider. Please note that once treatment or assessment begins, clients may still be transferred to a different clinician at the PSC or provided with an outside referral if their...
needs change or there is a clinically appropriate reason to do so. The PSC reserves the right to refuse services and provide appropriate referrals to anyone whose needs may be better served by another agency or provider.

The decision as to whether the needs of a particular client can be met by the PSC, and whether acceptance of the client will serve the training mission of the PSC will be made by the Clinic Director on a case-by-case basis. In general, the PSC does not accept cases requiring services considered outside of the areas of expertise of the supervisors or beyond the capabilities of the student clinicians. Cases are also monitored to insure that training needs do not significantly disrupt or delay treatment.

**Services Provided**

The specific services offered by the PSC are dependent upon the training and research needs of the faculty and student clinicians and on the availability of resources necessary for the services. Psychological services provided by the PSC may include (but are not limited to):

- Individual and group treatment for difficulties with mood, anxiety, eating/body image, relationships, self-image, etc. for adults, adolescents and children
- Behavior problems of children and adolescents
- Couples/family therapy
- Parent consultation and therapy
- Adjustment/personal growth and development therapy
- Trauma treatment
- Stress management and relaxation training
- Social skills training
- Vocational assessment and consultation
- Psychological assessments and evaluations (e.g., learning disabilities, Attention Deficit Hyperactivity Disorder, etc.)
- Consultation and training to other professionals and the community

Clinicians typically draw from a variety of approaches when providing psychotherapy such as:

- Cognitive Behavioral Therapy
- Interpersonal Process
- Emotion Focused Therapy
- Behavioral Therapy
- Humanistic/Client-Centered Therapy
- Dialectical Behavior Therapy
- Feminist Therapy
- Existential Therapy

A variety of assessment instruments may also be utilized such as those that measure cognitive ability, achievement, personality, career interests, etc.

**Eligibility for Services**

PSC services are provided for members of the local community as well as University of the Cumberlands students. Current or former students in the University of the Cumberland’s Ph.D. program in Clinical Psychology are NOT eligible to receive services and will be provided with an appropriate referral upon request. Other current or former University of the Cumberland’s students may be provided with an appropriate referral should their connection to or relationship with PSC faculty, staff or students pose any ethical or clinical problems.

**What to Expect**

After initially contacting the PSC you will be scheduled for a brief phone screening. During this 30-45 minute phone conversation, the clinician will ask you several questions about the services and/or resources you are seeking along with your mental/physical health history and other relevant information. The screening clinician will then take the information you provide back to his/her supervisor and/or other members of the PSC clinical team for consultation and disposition. Once a disposition has been given, a clinician or administrative assistant will contact you to discuss scheduling your first regular appointment (should it be determined that psychotherapy and/or assessment at the PSC is the most appropriate option for you), or he/she will provide you with appropriate referrals. Please note that your screening clinician may or may not be the person you meet with on an ongoing basis should you decide to enter psychotherapy or proceed with an assessment. Furthermore, PSC
services may not be the most appropriate resource for your situation, and you may be referred to an outside provider. All treatment recommendations or clinician assignments are made in an attempt to maximize fit between client needs and clinician attributes, areas of expertise, level of training, etc. Please note that once treatment or assessment begins, clients may still be transferred to a different clinician at the PSC or provided with an outside referral if their needs change or there is a clinically appropriate reason to do so. The PSC reserves the right to refuse services and provide appropriate referrals to anyone whose needs may be better served by another agency or provider.

How Psychotherapy Works
The purpose of psychotherapy is to assist you in the development of healthy thinking, feeling, and behaving. A wide variety of concerns can be discussed including but not limited to communication problems, relational difficulties, depression, anxiety, and experiences of abuse. You can expect to be treated with the utmost respect and professionalism. Most scheduled sessions are approximately 45-50 minutes in length (sometimes longer for group therapy). You will work with your clinician to determine how often sessions should be scheduled and what your treatment plan will be.

Psychotherapy provides an opportunity to talk with someone about issues or problems you may be experiencing. Clinicians utilize various skills to build relationships, assess personal problems, and provide assistance by giving feedback, support, education, or other helpful resources as appropriate. Clinicians rarely give advice or offer direct suggestions about how to solve problems. Instead, you may expect your clinician to be empathic and warm as he or she helps YOU process various issues and come to deeper understandings. Other resources may include the assistance of health services, psychiatrists, or other mental health professionals. If medical attention is warranted, your clinician will assist you in securing an appropriate referral. Psychotherapy and assessments at the PSC are completely voluntary and may be discontinued at any time. Ideally, psychotherapy is no longer needed once a client and his or her clinician mutually agree that the maximum benefit has been reached.

The Benefits and Risks of Psychotherapy
Research demonstrates that psychotherapy is effective in helping many people deal with mental, emotional, relational, and developmental issues. However, benefits and particular outcomes cannot be guaranteed, and there are some risks involved. Some research suggests that a small minority of clients’ problems may actually worsen when they engage in psychotherapy. Because psychotherapy provides an environment to talk about unpleasant issues, both past and present, negative feelings may arise related to those issues. Relationships may also become strained as you make changes that impact the lives of others. In addition, due to the nature of a small community, you may encounter your clinician or other PSC staff at local businesses or events. Nevertheless, the PSC will make every possible effort to support you and maintain your confidentiality.

Alternatives to Traditional Psychotherapy
The following are some examples of alternative helping systems that have varying degrees of research supporting their success: self-help books and bibliotherapy, recreational and religious/spiritual activities, assertiveness and stress management training, crisis services such as sexual assault crisis centers and suicide hot-lines, social service agencies, legal assistance, and 12-step support groups. Assistance locating resources other than traditional psychotherapy is available upon request.

Psychological Evaluations/Assessments
When seeking a psychological evaluation/assessment, please note the following:

- We may not be able to conclude that you (or your child) have the diagnosis you are seeking testing for.
- We cannot guarantee testing results/our report will result in accommodations in an educational or standardized testing situation.
- It is the client’s responsibility to obtain the necessary information required for us to perform the assessment consistent with the standards of your institution. For instance, some institutions/testing companies do not accept testing performed by trainees. Other institutions/testing companies have particular tests or information that they require to be included in the assessment in order to accept the report. Clients must contact the relevant agency to which they want their report submitted and obtain the agency’s standards for testing. It is also helpful if you provide contact information for the agency to which you wish to submit the report along with a written release of information, so that we may follow up with any questions if necessary.
Psychological Evaluation/Assessment Process
Most assessments require a significant amount of information from the client in addition to the testing performed in the clinic. Frequently, we request that you obtain school records, prior testing reports, IEP/504 reports/plans, and any other documentation relevant to your testing concern. We may also request you sign release forms so that we can obtain information from other relevant individuals, such as parents/caretakers, school officials/teachers, and physicians or other treatment providers. This information will help your clinician obtain a complete picture of how you are performing in school, work and home environments, which will assist in providing the most accurate diagnosis and recommendations.

In addition to the lengthy interview and information gathering described above, you will be asked to complete a variety of standardized tests in the clinic. The specific tests you are asked to complete will depend on the problems/concerns you describe. We tailor our assessments to each individual, so it is possible you will be asked to come back to the PSC several times after the clinician has had the opportunity to score some of your tests and consult with his/her supervisor and/or clinical team.

Evaluation/Assessment Feedback and Reports
As our clinicians are in training, we cannot guarantee a particular timeline for a report. If you need an assessment completed by a particular date, we may recommend that you obtain the assessment from a different provider. Please discuss this issue with your clinician at your phone screening or as soon as possible. PSC clinicians do make every effort to complete reports within 5-6 weeks after your last assessment appointment.

Please note that much of the information you reveal to the clinician will be described in the report. While we make an effort to only include information that is relevant to making or ruling out a diagnosis (e.g., we would not describe a traumatic event that occurred in your life if it did not relate to your diagnosis, and even then we would make an effort to protect your confidentiality), we cannot guarantee that information would or would not be included in the report.

When the report is completed, we will contact you and request an appointment for a feedback session. During the feedback session, the clinician will provide you with a detailed account of your testing results, diagnostic conclusions, and recommendations. This is a great opportunity for you to ask any questions you have about the report. We do not issue the report without a feedback session as it is essential to convey the information directly to the client since reports often use technical language. Clients 18 years of age or older must provide written permission before an additional person (i.e., parent, sibling, spouse, etc.) is allowed to attend the feedback session.

Reports may be forwarded to appropriate providers and/or agencies upon client request and after completion of a signed release of information. Clients may also be given one (1) copy of their report for their own records.

Research
Clinical information and materials such as documents, test data, survey results, etc. obtained through the normal course of psychotherapy and assessment may be used for program management, research, and training purposes. Confidentiality is protected by restricting access to these materials. Names and identifying information will be removed from clinical materials prior to their use in research and/or scientific publication. In most cases, data is de-identified and reported in aggregate form only. Any client who is asked to participate in a research study in addition to information generated through the normal course of psychotherapy/assessment will not be penalized if he/she chooses not to participate (i.e., services at the PSC are not withheld as a result of declining research participation). You may opt in or out of being contacted regarding participation in additional research on the signature page.

Client Rights
You have the right to:
- Be treated with dignity and respect
- Know the qualifications and professional experience of your clinician and your clinician’s supervisor (if applicable)
- Ask questions regarding your treatment
- Know information concerning diagnosis, treatment philosophy, method, progress, and prognosis
- Participate in decisions related to your treatment

PAGE 4 – CLIENT INITIALS ______________________
• Refuse treatment methods or recommendations
• Know your test results (if applicable) and have them explained to you in a manner that you understand
• Request a second opinion or a referral to an outside clinician or agency
• End services at any time (please discuss your reasons for wanting to end services with your clinician)
• Privacy and confidentiality
• Request a transfer to a different clinician
  o Clients are welcome to request a transfer to a different clinician. Although consistency in the therapeutic relationship is critically important, the originally assigned dyad may not always be the best fit for an individual’s needs.
  o Clients wishing to transfer should make one last appointment with their current clinician to explain reasons for requesting a transfer. The clinician will then work with the client to determine who or what resource would be a better match for his/her needs and arrange a transfer.
  o Please be advised that requesting a transfer may result in a wait for services given existing caseloads and schedules.
  o Administrative staff will not make the clinical decision of transferring a client from one clinician to another.
  o Any client/clinician assignment decision can be appealed directly to the Director of the PSC.

Client Responsibilities
You have the responsibility to:
• Maintain your own personal health and safety and to report any threat immediately to either a PSC clinician or other appropriate resource
• Take an active role in the psychotherapy/assessment process (i.e., honestly sharing thoughts, feelings, and concerns)
• Follow through on assignments mutually agreed upon with your clinician
• Reflect on themes or issues that may arise during psychotherapy
• Provide accurate information regarding past and present physical and psychological problems (including hospitalizations, medication, and/or previous treatment that may impact your current treatment)
• Keep scheduled appointments and reply to PSC contact requests
• Pay all fees at the time of service

Recording/Observation
Because the PSC is a training clinic, all psychotherapy and assessment sessions are either recorded (audio or video) and/or observed (two-way mirrors or live observation). Recording/observation of your sessions can help you, the trainee, and the supervisor(s) to review the progress of your psychotherapy/assessment and ensure that you are receiving the best care possible. Therefore, recording and/or observation is a requirement of receiving services at the PSC. The recordings are only viewed by your clinician, his/her clinical supervisor, and/or other members of the PSC for training purposes. The recordings are never removed from the PSC and are erased promptly.

Appointments and Attendance
Psychotherapy sessions are typically 45-50 minutes in length. Assessment sessions vary in length based on your needs, your schedule, the clinician’s schedule, and your ability to concentrate for extended periods. Typically, a time period of about 2 hours (up to 5 hours) is needed for each assessment appointment. If you are not able to keep your appointment, call in advance to cancel and/or reschedule. Missed sessions and late arrivals are problematic for both clients and clinicians. Therefore, we ask clients to make a commitment to attend all of their scheduled appointments.

PSC policy on missed and late appointments is as follows:
• You should provide at least 24 hours advance notice of cancellation. Failure to do so for 2 consecutive appointments may result in the termination of services (with an appropriate referral).
• If you are more than 15 minutes late without prior notice, your clinician will assume that you are not able to attend the session and may leave the PSC.
• If you have cancelled or missed a session, it is your responsibility to contact the clinician or administrative assistant to reschedule.
• If you miss two or more sessions in a row, without calling to cancel or reschedule, your clinician will try to contact you either by phone or email (based on the permissions you have granted us). If you do not respond within one (1) week, we will assume that you no longer desire services and will initiate termination by letter. Please note that this may affect your ability to complete a successful assessment in the future as appointments typically need to be scheduled close together in time for the assessment to be considered valid.

Fee and Payment Policies
Fees are payable to the administrative assistant at the time of service. Debit or credit cards are the preferred form of payment. Cash will not be accepted or kept on the premises. An additional $20 fee will be charged to all returned checks which must be paid in full before receiving additional services.

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Phone Screening</td>
<td>Free</td>
</tr>
<tr>
<td>Psychotherapy Fee</td>
<td>$15/session (paid at the beginning of each session)</td>
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<tr>
<td></td>
<td>(or any other individual, clinical service)</td>
</tr>
<tr>
<td>Psychological Testing/Evaluation Fee</td>
<td>$200 (flat fee paid at the beginning of the testing/evaluation)</td>
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Please note that the PSC does not bill or accept insurance of any kind and services are typically not reimbursable by insurance due to the trainee status of clinicians. Clients receiving psychotherapy will not be allowed to proceed with their scheduled session until payment has been made (including payment of any returned check fees); clients receiving testing/evaluation services will not be allowed to begin their assessment until the fee has been paid in full. Failure to pay fees and/or inability to proceed with treatment (i.e., gaps of over two weeks between sessions) due to unpaid fees will result in termination of services and referral to other provider(s) as appropriate.

Clinicians will not refuse services in emergent or crisis situations due to inability to pay or past failure to pay, but will provide appropriate assessment/intervention for crisis situation followed by a referral when appropriate.

Confidentiality
Many precautions are taken by the PSC to protect any information that you disclose (verbal or written). In most situations, it is not permissible for clinicians to release information about your psychotherapy/assessment to others unless you have signed a written release of information form. However, there are a few important exceptions to this which are outlined below.

• Since this is a university training clinic, information about your case is shared with other students, faculty, and supervisors in the PSC, who are all required to follow the same confidentiality procedures as your clinician. In addition, it may be necessary to consult with other mental health professionals outside of the PSC. In this instance, every effort is made to keep your identity confidential during the consultation, and these professionals are also required to maintain confidentiality.
• In some situations that involve administrative or legal concerns, the PSC reserves the right to consult with the appropriate Vice President and/or President of the University as needed.
• When the PSC is reviewed by accrediting agencies, the agencies may examine random files for completeness and adherence to professional standards.
• If we have assessed that you intend to kill or seriously harm yourself or someone else, if you require immediate medical intervention, or if you share information that leads to a reasonable suspicion of any of the following, we are legally mandated to take appropriate steps to protect.
  o Abuse, neglect, or exploitation of a child or minor (committed by you or anyone else)
  o Domestic violence
  o Abuse, neglect, or exploitation of a mentally ill person, developmentally disabled person, or elderly individual
• If you become involved in a lawsuit and your mental or emotional condition is an element of your claim or if a court orders the release of confidential information we may be mandated to comply with the demands of the court.
• If a client files a complaint or lawsuit against a clinician or the agency/university, relevant information regarding that client may be disclosed for the clinician's/agency's/university's defense.
• The federal government may order release of confidential information due to the suspicion of terrorism.
• If you are a minor (under age 18), psychotherapy records and assessment results are available to your parent/guardian. Also note that minors must obtain parental consent in order to receive psychological assessment or psychotherapy.

The above exceptions to confidentiality are extremely rare. However, if they occur, it is the PSC’s policy to discuss with you (whenever possible) any action that is being considered. Any required disclosure in these situations will be made to the appropriate authority and will be limited to material directly relevant to the issues involved.

Records
All psychotherapy and assessment records are confidential and are stored within the PSC for a minimum of 6 years. Extensive precautions have been taken to ensure privacy and security. Please speak with your clinician about any questions or concerns regarding the contents of your record.

Please note that we utilize an electronic means of data storage and record keeping. Many appropriate precautions have been taken to protect your confidential information; however, limited access by technical system administrators may be necessary at times.

Payment
Your credit/debit card or check payment (which may or may not include your name and additional personal information) may be processed by administrative personnel outside of the PSC; however, other faculty or administrators not associated with the PSC do not have access to your clinical record without your written permission.

Couples and Family Therapy
Regarding couples or family therapy, the clinical record of the content of couples or family sessions belongs to the couple or the adult family member(s) rather than the individuals involved; therefore, ALL adult members of the client group must give written consent before records including session content will be released. Each individual will also have a record containing demographic information, diagnosis (if applicable), and documentation of any individual interaction he/she may have with the PSC. This individual information is accessible by the appropriate individual and may be released given written permission. Further, any information shared with the couples or family clinician by any individual in the client group will NOT be held in confidence from the other members of the client group.

Emergency Contacts
In the unlikely event of a crisis situation including but not limited to a life-threatening emergency, a client’s death/incapacitation, or imminent risk of harm to self/others, the PSC reserves the right to communicate with the client’s emergency contact and/or appropriate authorities (which for University of the Cumberlands students may include the Vice President for Student Services.)

Complaints
You have the right to lodge a complaint or make inquiries regarding any aspect of your treatment or assessment. You may contact Dr. Christen T. Logue, Director of the PSC at 859-980-7937.

Contact Information
Generally, an administrative staff member is available to answer phones during PSC hours (call for specific hours of operation); however, due to staff absences, other incoming calls, etc., it may be necessary for you to leave a confidential voicemail. Trainees and faculty members are generally not available to answer calls immediately. However, your message with PSC administrative staff or on confidential voicemail will be delivered to your clinician and/or his/her supervisor (if applicable) as promptly as possible. As the clinicians in the PSC are graduate students, it may take time before they can call you back. However, most clinicians are able to return your call within 1-2 business days. Please note the PSC is also closed at various points of the year for university holidays and academic breaks. Your clinician will inform you of these dates or other dates he/she is unavailable in advance.
General contact information is listed below:
University of the Cumberlands – Psychological Services Clinic
410 Meijer Drive; Suite 309
Florence, KY 41042
Office: 859.980.7937
Fax: 859.980.7913

For scheduling or general information, please contact the Administrative Assistant at 859.980.7937.

**Emergencies**
The PSC does NOT provide 24-hour emergency coverage. For mental health emergencies please utilize one of the following resources depending on the severity of your situation:

- National Suicide Prevention Lifeline
  - 1-800-273-TALK (8255)
  - [http://www.suicidepreventionlifeline.org/](http://www.suicidepreventionlifeline.org/)
- St. Elizabeth’s Hospital Emergency Departments
- Call 9-1-1
- Proceed to the nearest emergency room

**Email and Social Media**
PSC faculty and trainees are disallowed from contacted or communicating with clients through social media of any type. Therefore, any attempts to communicate or become “friends” on social media will be ignored.

Email may be used for scheduling or other brief/non-clinical purposes, but clients should note that email is not a secure means of communication and email messages may not be read at all or within a given period of time. Therefore, please do not use email to communicate with PSC staff regarding clinical, confidential, or emergent information. Please note that any communication with PSC faculty and/or trainees (including email or any other form of electronic communication) may become part of your legal record.

**Holidays and Inclement Weather**
The PSC will follow the general University of the Cumberland’s NKY campus schedule. If the university’s NKY campus closes or reduces hours of operation due to inclement weather, the PSC will follow. Clinicians will attempt to contact clients of all missed appointments after an unscheduled closing; however, clients are encouraged to contact the PSC as soon as possible upon reopening to reschedule a missed appointment.

**Miscellaneous Policies and Procedures**
- Clinicians are encouraged to refuse gifts from clients. If you wish to express appreciation to your clinician, please do so verbally, as this will be highly appreciated and valued by your clinician. Material gifts such as CDs, jewelry, books, etc. will most likely not be accepted due to ethical guidelines related to protection of clients from the potential for exploitation.
- Clinicians and clients should seek to minimize external (outside of session) contact as much as possible. While elimination of all contact outside of psychotherapy is difficult in a small community, contact should be minimized when possible so as to establish and maintain appropriate/healthy boundaries for both parties, support confidentiality, protect against exploitive dual relationships, and create the most effective atmosphere possible for psychotherapy/assessment.
- Parents or guardians of minors are required to remain in the building while their child receives services. In no instance may a minor client leave the premises with a clinician.
- The PSC maintains a no weapons policy. Please do not bring weapons of any kind to the PSC at any time.
SIGNATURES

Communication
By signing below you give us permission to contact you by any means you have provided such as phone or email and including the possibility of leaving you a message should we reach voicemail or an answering machine.

_________________________________________  ____________________
Signature                                                      Date

Research
PSC participates in a variety of research projects designed to improve services and expand knowledge. By signing below, you grant permission for the PSC to utilize your anonymous, de-identified data for research purposes/program evaluation and to contact you about participation in additional research project(s) as opportunities arise. Your decision to contribute anonymous, de-identified data for research purposes/program evaluation and/or to participate in any additional research opportunities is completely voluntary and will not affect the services you receive.

_________________________________________  ____________________
Signature                                                      Date

Recording/Observation
Clinicians of the PSC are graduate students under the direct supervision of licensed psychologists/faculty members. Trainees are required to be under supervision and must report their clinical activities to their supervisor(s). All trainees under supervision are also required to disclose their level of training and the name of their clinical supervisor(s) to clients. Audio or video recording of your sessions can help you, the clinician, and the supervisor(s) to review the course and process of your psychotherapy/assessment. Recordings are to be used for your treatment and/or supervisory purposes only. Audio/video files will never be removed from the PSC and will be erased promptly. You will always be made aware of any observer before the session begins. By signing below, you grant permission for your sessions to be recorded and/or observed for training purposes.

_________________________________________  ____________________
Signature                                                      Date

Attendance/Fees
By signing below, I agree to the fees and attendance polices as outlined above.

_________________________________________  ____________________
Signature                                                      Date

General Policies and Consent for Treatment
By signing below, I agree that I have read and understand ALL of the above information, that I am aware of my rights, the benefits, and risks that psychotherapy/assessment may present, and that I am aware of the limits to confidentiality. I consent to psychotherapy and/or assessment services for myself or my minor child under the policies/procedures outlined above. Further, I attest that I am the legal guardian of the minor child seeking services and have the legal right to consent to his/her treatment (if applicable). Should I have any questions or concerns about any of this information, I agree to discuss these promptly with my clinician or with the Director of the PSC.

_________________________________________  ____________________
Signature                                                      Date