

Jerry M. Ruhl Ph.D.
Clinical Psychologist (Texas #34359)
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INFORMED CONSENT FOR TREATMENT

I, the undersigned, do hereby voluntarily consent to evaluation, recommendation, and/or treatment by Jerry M. Ruhl, Ph.D.

I am aware that the practice of psychotherapy or counseling is not an exact science and that the predictions of the effects are not precise nor guaranteed. I acknowledge that no guarantees have been made to me regarding the results of treatment or procedures by this therapist. Further, I understand that evaluation and treatment will involve discussion of personal events in my own history which, at times, can be discomfoting and is at times very personal. Participation in psychotherapy requires effort on my part, honesty, and openness to change in order to influence experience, including thoughts, feelings and behaviors. There is no guarantee that therapy will yield intended results. In a professional relationship (such as psychotherapy), sexual intimacy between a therapist and a client is never appropriate. Within a reasonable time after the initiation of treatment Dr. Ruhl will discuss with each client his working understanding of the problem, therapeutic objectives, and his view of possible outcomes. Don't hesitate to bring up questions or concerns at any time during treatment.

I am aware that I may terminate my treatment at any time without consequence, but that I will remain responsible for payment for services that I have received. I may also at any time seek a second opinion. If clients need to contact Dr. Ruhl between sessions, please leave a message at the supplied numbers and calls will be returned as soon as possible. After regular business hours (9 a.m. to 5 p.m.) clients can call 911 for emergency assistance.

Dr. Ruhl's current fee is \$140 (ONE-HOUR session). Dr. Ruhl is not a member of any HMO or PPO networks or specific insurance plans. Telephone conversations, report writing, and other consultation will be charged at the standard hourly rate. Professional services are rendered and charged to the client and not to the client's insurance company. Dr. Ruhl will provide a copy of receipts on a monthly or quarterly basis which can be submitted by the client to the client's insurance company for reimbursement. Not all issues/conditions which are the focus of psychotherapy are reimbursed by insurance companies. It is the client's responsibility to verify specifics of coverage.

I am aware than any cancellations of appointments must be made at least 24 hours in advance of the scheduled appointment. If I cancel less than 24 hours in advance or do not show up for my

Page 1 of 3 Initials _____

appointment, I understand that I will be charged the regular fee for the session. I am further aware that payment is due at the time that services are rendered. If I do not provide payment for the services that I receive, this may be reported to a collection agency and my treatment may be discontinued by this therapist. In such a situation, this therapist will provide referrals to other professionals.

Dr. Ruhl is a licensed clinical psychologist, (Texas #11498). He completed his Ph.D. at Pacifica Graduate Institute in Carpinteria, CA. Dr. Ruhl practices a variety of methods of treatments and can explain what techniques will be used.

Generally speaking the information provided by and to a client during therapy sessions is legally confidential and is released to other parties only with the client's written consent. The laws of the State of Texas provide for the disclosure of this confidential information to others without the client's consent in some very specific circumstances. These situations include the following:

- If a client is under the age of 18 parent(s) or legal guardians(s) may have access to a client's records and may authorized their release to other parties.
- If a client is determined to be in imminent danger of harming themselves or someone else.
- If the client discloses the abuse or neglect of children, the elderly, or disabled persons.
- To qualified personnel for specific program audits or evaluations.
- To individuals, corporations, or governmental agencies involved in paying or collecting fees for services.
- If a court subpoenas the therapist to testify about the client.
- In legal or regulatory actions against a professional.
- In proceedings in which a claim is made about one's physical, emotional, or mental condition.
- When disclosure is relevant to any suit affecting the parent-child relationship. This includes divorce and child custody deliberations.
- When otherwise legally required.

If clients place their mental status at issue in litigation initiated by the client, the defendant may have the right to obtain psychotherapy records and/or testimony. Disclosure of confidential information may be required by health insurance carriers or HMO/PPO/MCO/EAPs in order to process claims. It is the patient's responsibility to file insurance claims. Dr. Ruhl will provide necessary information, such as diagnostic codes and dates of treatment, required by insurance carriers. He has no control or knowledge over what insurance companies do with the information or who has access to the information once released to said companies.

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 that may be of a confidential nature, it is agreed that should there be legal proceedings neither the client nor the client's attorneys, nor anyone else acting on the client's behalf will call on Dr. Ruhl to testify in court or at any other proceeding, nor will a disclosure of the treatment records be requested.

Mediation and arbitration: All disputes arising out of or in relation to this agreement to provide psychotherapy services shall first be discussed with Dr. Ruhl. If, after a client has discussed his or her concerns, and a conflict remains, the dispute will be referred to mediation before, and as a pre-condition of the initiation of arbitration. The mediator shall be a neutral third party chosen by agreement of Dr. Ruhl and the client. The cost of such mediation, if any, shall be split equally, unless otherwise agreed. In the event that mediation is unsuccessful, any unresolved controversy related to this agreement shall be submitted to and settled by the Texas State Board of Examiners of Psychologists, 333 Guadalupe, Suite 2-450, Austin, TX 78701, (512) 305-7700, in accordance with the rules of the Board and the American Psychological Association which are in effect at the time the demand for arbitration is filed.

I certify that I have read, or have had explained to me where necessary, fully understand, and agree to the contents of this document.

Signature_____

Date_____