

### LIMITS OF CONFIDENTIALITY

Contents of all therapy sessions are considered to be confidential. Both verbal information and written records about a client cannot be shared with another party without the written consent of the client or the client's legal guardian. Noted exceptions are as follows:

#### **Duty to Warn and Protect**

When a client discloses or implies a plan for suicide, the health care professional is required to notify legal authorities and make reasonable attempts to notify the family of the client. In cases in which the client discloses intentions or a plan to harm another person, the mental health professional is required to warn the intended victim and report this information to legal authorities.

#### **Abuse of Children and Vulnerable Adults**

If a client states or suggests that he or she is abusing a child (or vulnerable adult) or has recently abused a child (or vulnerable adult), or a child (or vulnerable adult) is in danger of abuse, the mental health professional is required to report this information to the appropriate social service and/or legal authorities.

#### **Physical or Mental Incapacity**

When a client is incapacitated by mental or physical illness, or by substance abuse, the mental health professional is required to notify a family member and/or report concerns to legal authorities to ensure the safety of the client.

#### **Minors/Guardianship**

Parents or legal guardians of non-emancipated minor clients have the right to access the clients' records.

#### **Court Subpoenas**

When a case record or mental health professional is legally subpoenaed by a court of law, the professional must comply with the court order.

#### **Insurance Providers (when applicable)**

Insurance companies and other third-party payers are given information that they request regarding services to clients. Information that may be requested includes, but is not limited to: types of service, dates/times of service, diagnosis, treatment plan, description of impairment, progress of therapy, case notes, and summaries.

*I agree to the above limits of confidentiality and understand their meanings and ramifications.*

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Client Signature (Client's Parent/Guardian if under 18)

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Today's Date