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# **CONFIDENTIALITY**

**Unless stated otherwise (see below), all information disclosed during therapy sessions will be kept strictly confidential.**

**Exceptions are limited to the following:**

1. Confidentiality will be waived if the adult client or custodial parent or guardian of a minor receiving services signs a Release of Information form. Information released will be specifically defined on the form and will be released only to the party identified on the form.
2. Confidentiality will be waived if a client appears to be at risk of harming self, or others, or where a reasonable suspicion of child physical or sexual abuse or elder abuse exists.
3. If a client is ever involved in litigation, the client's file can be subpoenaed by a judge of the court.
4. Where the identified client is a minor, although parents are privy to information disclosed in a session, each case will be treated on an individual basis, and your therapist will discuss and clarify issues of confidentiality regarding your child's treatment prior to initiating treatment.

**I have read and my doctor has reviewed with me, and I understand the information on this sheet.**

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**Signature**

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**Date**