Client Information & Consent

In an effort to answer many of your questions and provide you with important information, I will be happy to answer any questions you may have.

Length and Frequency of Session

Typically, we will meet once a week for a 50-minute session on the same date and time that we have agreed upon. Duration and frequency may vary depending on the nature of your problem and your individual needs.

Fees/Cancellation

Fees are due at the end of each session. If you are more than 20 minutes late and have not contacted me, I will assume that you are not coming to the session. If you need to cancel your appointment, please let me know at least forty-eight-hours ahead of time. Otherwise, I will charge a cancellation fee. Please be aware that insurance carriers will not cover cancellation charges and therefore you will be responsible to pay the fee in full for the canceled session for any reason, which includes, but is not limited to: illnesses, medical emergencies, child care conflicts, travel delays, and job demands. Fees are reviewed yearly and may be raised each year. I encourage you to discuss any financial concerns or hardships as soon as they arise so we can adjust our arrangement accordingly.

Confidentiality

Any and all information shared between you and Sachie Makishi, LCSW, is confidential and will only be shared under the following conditions: 1. You sign a HIPAA release of information with a third party such as your insurance company. 2. Therapists are required by law to report to the appropriate agency if there is suspicion of child or elder abuse. 3. Therapists are required to intervene appropriately with threats of serious harm to yourself or others. This could require reporting to the police or appropriate agencies. 4. A court of law subpoenas information for a legal proceeding.

Emergencies and My Availability

I am generally not available for emergency visits or calls. In an emergency, you should call 911, a telephone crisis line, or proceed to a psychiatric emergency facility. If you anticipate needing to call a crisis hotline, you may want to write down that number now where you will be able to find it when you are in a crisis. I do not have a notice to remind

you of this arrangement on my answering machine. For non-urgent calls and emails, I will try my best to respond within 24hours.

Freedom to withdraw

You have the right to end therapy at any time. If you wish, I can refer other qualified psychotherapists.

Consent to Treatment

Your signature below indicates that you have read and understood this document. I look forward to working together with you.

Print Name(s):		
Signature(s):		
Date:		