

Laila Cooper, Ph.D.
Clinical Psychologist

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Fairfax, VA 22033

Informed Consent for Treatment

Welcome to my psychotherapy practice. You've taken a difficult and important step toward making change and improving your situation. Two fundamental components of a positive and productive therapy relationship are trust and understanding between therapist and client. For that reason, I request that we review my policies together and that you ask any questions you may have about them. I am always happy to answer your questions and respond to your concerns. We will both sign this form after we review it, and can return to it at any point in the future if you would like.

Qualifications

I have been providing psychotherapy to adolescent and adult individuals, couples, and groups since 2006. I have a PhD in Clinical Psychology from George Washington University, where I focused on service provision for cultural minority groups. I am licensed by the Virginia Board of Psychology (license #VA 0810004906).

Structure of Therapy

Timing

Unless we agree on an alternative format, therapy will take place once per week for 50 minutes. There is no formula for how many sessions therapy should last, that is something that we will discuss and evaluate as we move toward meeting your goals. We will work together to decide when is an appropriate time to end therapy; this is a collaborative process.

Cancellation Policy

From time to time there may be a conflict that prevents you from attending therapy. Should this occasion arise, I request that you provide me **48** hours notice of the cancellation by sending me an email at drlailacooper@gmail.com. If you do not cancel a session 48 hours in advance and do not attend, you will be charged the full fee for a regular session (\$190). There are some exceptions to this policy (e.g., severe illness, family death), that will be evaluated on a case-by-case basis. I give one "free" missed appointment per year, and after that will include the missed session fee with your next invoice.

Risks and Benefits

Therapy is a process that has distinct benefits as well as real risks. During therapy we may discuss topics that bring about painful feelings (for example, anger, grief, or hopelessness). This is a normal process of working through the issues that pain you, and will likely not be permanent. I have confidence in therapy's ability to empower you to make the change you

desire in your life. However, as a collaborative process that relies on hard work and a good match between us, we may decide that you would be better served by a different service or another therapist.

Email and Phone Policy

I use email to conduct most communication regarding scheduling between sessions. I try to reply to all emails within 24 hours. If you need to communicate about something else (not an emergency – see below), please let me know and we can either proceed via email (this is up to you based on your thoughts about confidentiality) or set up a time to talk by phone if it cannot wait for the next session.

I do not use text messaging; please do not text me, I will not receive it! I do receive emails realtime so that is the best way to communicate if you are arriving late, etc.

Emergencies

If you have an emergency between our sessions and need immediate help, I recommend that you call 911 or go to your nearest emergency room. I do not check messages enough to be available for a crisis, and email is not a reliable way to communicate emergency needs. If we find that once weekly therapy is not an adequate level of care for your needs, I will make appropriate referrals and connect you with more comprehensive services.

Confidentiality

Your confidentiality is extremely important to me. Everything that we discuss in therapy is private and I do not share without your written permission to do so. If you choose to send me emails, it is important for you to know that I use gmail, and although I keep my personal account very secure, our communications are subject to ruptures in privacy known to affect all public internet and email information.

While your privacy is paramount, so is your safety and the safety of others who may be in danger. There are several situations in which I may be legally obligated to break confidentiality:

- (i) If you express intent to seriously harm yourself or another person.
- (ii) If there is suspicion or evidence of abuse/neglect of a child or elder.
- (iii) If compelled by a court order to do so (this is extremely rare).

In any of the above situations, you and I will first discuss and attempt to come to an agreement on how to proceed. If we are unable to do so in a safe and legal way, I will do so independently.

In some cases I may seek consultation from another professional (psychologist, psychiatrist) in order to provide you the best possible care. In those cases, I will do everything possible to maintain your confidentiality, omitting from out consultation your name and any identifying information.

Fees

The fee for each 50-minute session is \$190 for individuals and \$215 for couples. Payment by online via Square is due at the beginning of each session or in an alternative format we agree on.

I am not in-network with insurance panels, however I am happy to provide you with a superbill each month with necessary documentation to receive out of network reimbursement from your insurance company.

As above, fees incurred for missed sessions are due along with your regular invoice.

After an initial period of consistent payments, I am open to arranging for monthly billing plans. This will be decided on a case-by-case basis.

I, _____, have read and discussed the above policies with Laila Cooper, Ph.D. I was given the opportunity to ask questions, they were answered to my satisfaction, and I understand my rights and responsibilities as a client. I give consent to participate in therapy within the above guidelines. I have been given a copy of this form for my records.

Client Signature

Date

Client Signature

Date

Client Signature

Date

Laila Cooper, Ph.D.

Date