

## INFORMED CONSENT FOR BEHAVIORAL HEALTH INTERVENTIONS

## **WellStar Psychological Services**

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This document contains important information regarding the behavioral health services you will be receiving. Please read this document carefully and write down any questions you might have so that you and your provider can discuss them during your appointment.

**PSYCHOTHERAPY:** Psychotherapy (or counseling) is a goal-directed process that involves the identification of specific goals that you (the client) have identified as important to improving the quality of your life. There are many theories about how this change occurs. Regardless of the specific approach, it is important to realize that the outcome of treatment is determined, in large part, by your readiness to change problematic behaviors or actively address problems you are experiencing. This does not mean that all problems you experience are your fault, but that effective treatment will help you learn to do things differently to better manage the problems you are having. Throughout the course of psychotherapy, your psychologist (or psychotherapist) will utilize different treatment approaches, but with a strong emphasis on those practices that are supported by sound scientific evidence. For some, the treatment of choice might be specific cognitive or behavioral interventions, while for others gaining insight into why you are doing what you're doing might be the most helpful strategy.

In psychotherapy, you can expect the duration of appointments to be based on need. There may be occasions when it is necessary to meet as long as 50 minutes, and other times when a briefer session is appropriate. Services are usually offered individually, although we periodically offer groups that target a particular issue if it is of relevance to many of our clients. The focus of sessions will be to address the problem for which you are seeking assistance; depression, anxiety, coping with a medical problem, or some other difficulty; and your therapist is committed to helping you. In the event that the treating provider considers your problem outside of his/her scope of expertise, he/she will discuss a referral to a provider who is better suited to help you resolve your concern.

HEALTH & BEHAVIOR ASSESSMENTS/INTERVENTIONS: Health and Behavior assessments and interventions are services that focus, first and foremost, on a health-related problem that is (or could) interfere with your quality of life. Services include the following: preventing illness, disease, and health-compromising problems; promoting healthy lifestyles; identifying the stress that often accompanies and contributes to illness, disease, and health-related problems; and modifying health-compromising behaviors. Health and behavior interventions target specific health-related problems (e.g. tobacco dependence, obesity, etc.) and help to facilitate change via the use of various strategies.

Health Psychology interventions are offered individually, to couples, and sometimes in a group setting. Whatever the case, interventions are typically preceded by a brief assessment, during which you will meet with a clinical psychologist or psychotherapist for 30-60 minutes. The focus of this assessment is on the problem for which you are requesting assistance (e.g. weight management, chronic pain, etc.), and will include questions about how long you have dealt with the problem, how it is impacting your life, and different ways you have tried to solve the problem in the past. After this assessment, you and your therapist will begin discussing ways in which you can change behaviors to influence your physical problem(s).

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<u>MEDICATIONS:</u> Psychotropic medications may be recommended to you as a part of your treatment. Your provider will discuss with you the nature of your condition, reasons for prescribing medications, the likelihood of your condition improving with or without medications and the reasonable alternatives to the medications. Specifics such as the type of medication, dosage, duration of treatment and possible adverse effects will also be discussed with you by your provider. You have a right to refuse the recommended medications but it is recommended that you discuss your decision with your physician.

Medication management appointments last about 45-50minutes for an initial evaluation and about 20-25 minutes for a follow up appointment.

<u>POTENTIAL FOR DISTRESS:</u> Although intended to be helpful, participating in psychological and/or psychiatric services may involve discussing some information with the provider that could be potentially upsetting. It is possible that you might experience feelings of anger, frustration, sadness, or nervousness. Such reactions are sometimes surprising to the patient, but they are not unusual. It is important to remember that any physical, medical, or emotional problem we experience can increase stress and take a toll on us. If you experience any distressing emotions during your sessions, you are strongly encouraged to discuss this with your provider.

**FEES:** If you will NOT be filing insurance for this visit, payment in full will be required at the time of service. A self-pay discount may apply, please discuss with the front office staff if you have any questions.

<u>CANCELLATION/NO SHOW POLICY:</u> It is important that you make every effort to attend your appointment at the scheduled time and you are encouraged to arrive at least 15 minutes in advance. If you do not arrive in advance of your appointment time and your paperwork is NOT completed, you may be asked to reschedule your appointment for another day. If you need to cancel or reschedule an appointment please call our office on **770 514 6760**. We require appointment cancellations a **full business day** prior to your scheduled date and time. A no-show is someone who misses an appointment without canceling it in advance. Because we have many patients who are in need of our services, you may be subject to dismissal from the practice for repeated no-shows.

CONSENT TO ASSESSMENT: I have read the above disclosure statement and understand its terms. I agree to participate in the services that are described above. I am over the age of 18 and I am competent to enter into this agreement. Furthermore, if the reason I am receiving services here is related to receiving clearance for a medical procedure (for example, bariatric surgery and spinal cord stimulator implantation), I understand that my surgeon might cancel or delay my procedure, depending on my ability to change behaviors that are related to the problem for which I am hoping to have surgery. I understand that providers in the Wellstar Psychological Services practice do not provide court-ordered counseling. Lastly, if I plan to pursue disability, I understand that I need to discuss this with my provider at the onset of my treatment.

|  | Date: |  |
|--|-------|--|
| Signature of Patient (or Patient's Legal Representative) |       |  |
|  |       |  |
| Description of Authority to Act for Patient              |       |  |
|  | Date: |  |
| Signature of Witness                                     |       |  |

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