# TRACI CAMPBELL

LCSW

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**T** 512.921.4215

TraciCampbellLCSW.com

## **GENERAL INFORMATION**

I have a Masters Degree in Clinical Social Work from Texas State University and I am licensed by the State of Texas as a Social Worker. I have been working as a therapist for over 15 years with adults in individual therapy and adults in couples therapy. I also have also worked in a hospital setting with adults.

### CONFIDENTIALITY

All interactions with your therapist are confidential and will not be released without your permission. For the vast majority of clients, no exceptions to confidentiality are made. However, the law requires therapists to make exception in the following circumstances:

• You may request, in writing, that information be released to persons you designate.

• If there is evidence that you pose a clear and imminent danger of harms to yourself and or others, I am legally required to report this information to the proper authorities.

• Texas law required that anyone who learns of, or has strong suspicious of, abuse or neglect of any person under 18 years of age or of an elderly or disabled person must report this information to proper authorities.

• A court ordered subpoena can require me to release information contained in records or require me to testify in a court hearing.

• If you tell me of any sexual involvement with a mental health professional, I must report this to the appropriate State Examining Board.

• I am required, under the Patriot Act, to disclose your personal health information to authorized federal officials who are conducting national security and intelligence activities or providing protective services to the President or other important officials. Under this law, I cannot reveal to you when I have disclosed such information to the government.

### **ABOUT THERAPY**

Therapy provides opportunity for individuals to deal with person crises and to learn to make better decisions, improve personal skills, develop increased confidence, overcome blocks to personal effectiveness, and acquire a keener awareness and appreciation of their needs and the needs of others. In the personal interaction with a therapist, a client is helped to explore and express feelings, examine beliefs and ways of thinking about the world, reflect on patters of behavior, and work towards making health changes.

Personal commitment to therapy is crucial for success. Each session will typically start on time and last for 50 minutes. It is important that you keep appointments and participate in each session by discussing your feelings, including any uncomfortable ones you may be experiencing.

You have the right to terminate therapy at any time, although I may recommend that you continue. You should be aware that there are alternative to individual psychotherapy, including:

\* group therapy

\*couples therapy

- \* family therapy
- \* support groups (such as Alcoholics Anonymous and A-Anon)
- \*reading self-help books

Therapy is sometimes a painful process and can result in change in an individual, couple, or family life which may be unsettling. If you have concerns about the outcome of your therapy, please feel free to discuss them with me.

### **FEES**

My fee is \$150 per session.

I'm not an in-network provider for health insurance, however, I will be happy to assist you with the insurance paperwork so that you can file under your out-of-network benefits.

#### I accept personal checks or Credit Cards

For credit card payments, I use an encrypted, online credit card system, which will store your card number for convenience. Even though it is encrypted, it is important that you know that credit card transactions over the internet are vulnerable to theft. If you choose to use a credit card, please initial here to approve my use of a credit card with which you will provide me to charge for sessions or late cancellation fees. If it is used for a late cancellation fee, I will discuss this with you before charging.

I approve use of my credit card for the above-stated charges

# **LEGAL APPEARANCE FEES**

Please note that because I am extremely reluctant to appear in court, as such testimony does not generally benefit the client-therapist relationship, my fee for expert testimony in court or deposition is \$750 per hour, whether appearing by agreement, or by commandment of subpoena, beginning when I leave my office to appear in court or deposition, to include all travel time, wait time and testimony time, whatever form they may take, and ending when I arrive back at my office. This fee is non-negotiable. If it becomes necessary that I appear in court on your behalf, I will provide you with a contract to sign for these services.

#### PLEASE READ THE FOLLOWING POLICIES REGARDING FEES CAREFULLY:

\*Appointments not cancelled at least 24 hours in advance will be billed in full. IF YOU HAVE AN APPT ON A MONDAY, PLEASE LET ME KNOW BY THAT FRIDAY IF YOU WILL BE UNABLE TO ATTEND.

\*Fees are due and payable at the end of each session.

PLEASE NOTE THAT I AM NOT AVAILABLE ON AN ON-CALL EMERGENCY BASIS. A MESSAGE MAY BE LEFT FOR ME AT THE ABOVE PHONE NUMBER AND I WILL RETURN THE CALL WITHIN 24 HOURS UNESS OTHERWISE NOTIFIED.

Please feel free to discuss any of these policies with me before or during your time in therapy. Your signature below indicates that you have read, understood, and agree to abide by these policies.

A copy of this document will be provided to you upon request

#### I agree to the terms and conditions mentioned above:

Client Signature:

Date:

Therapist Signature:

Date:

#### Notice of Privacy Practices Receipt & Acknowledgement of Notice

I acknowledge that I have received and have been given an opportunity to ready a copy of Traci Campbell, LCSW Notice of Privacy Practices.

I understand that if I have any question regarding the Notice or my privacy right, I can contact Traci Campbell, LCSW @ 512-921-4215.

Client Signature:	Date:
Parent, Guardian or Personal Representative Signature:	
Patient/Client refuses to Acknowledge Receipt:	Date:

Therapist Signature: