

Christi Piker, MA LPCC
Lotus Blooming Out LLC
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970-299-4410

Informed Consent & Mandatory Disclosure Statement

General Information

I am providing the following information to let you know your rights as a counseling client in the state of Colorado:

- You are entitled to receive information about my counseling methods and techniques, the length of counseling and the cost. Please ask if you have questions.
- You may end counseling at any time, although a closing session is recommended.
- You should know that sexual intimacy between a counselor and a client is never appropriate and should be reported to the board that licenses the practitioner.
- You may request information concerning your counselor's training, educational degrees, licenses, and credentials.
- Any questions or complaints may be addressed to the licensing board. The practice of psychotherapy is regulated by the Mental Health Licensing Sections of Colorado Department of Regulatory Agencies. They may be reached at *1560 Broadway, Suite 1350, Denver, CO 80202*.

Christi Piker holds a Master's Degree in Clinical Mental Health Counseling and holds an LPCC in the state of Colorado-LPCC.0018596. She is working towards her LPC and is supervised under Brittany Alley MA, LPC- LPC.0016257 Colorado.

Confidentiality

The information you provide during counseling is *confidential*, **except** as provided in the Mental Health Statute (C.R.S. 12-43-218) such as:

- If your counselor has reasonable cause to suspect **child or elder has been abused or neglected**
- If you appear to be at serious risk for **hurting self or other**
- When you or your representative files a lawsuit or grievance against your counselor
- If you and/or family members are being seen by more than one counselor, communication between counselors may occur to coordinate treatment. Exceptions may be specifically agreed upon with your counselor.
- If you sign a release of information giving permission to release information to a specific individual or agency

Cancellations:

If you need to cancel your appointment with me, please try to do so at least 48 hours in advance. You will be billed for appointments without providing 24 hours notice via phone call.

Payment Policy:

Telemental health sessions will be the agreed upon sliding fee rate of \$45-\$60 per hour. Payments will be submitted electronically on the date of appointment through Square billing services.

Emails and Voicemails:

You may leave messages for me on my confidential voicemail (970-299-4410) or reach me by email at lotusbloomingout@gmail.com and I will respond within 1-2 business days.

Emergencies:

I do not provide 24 hours coverage. If you feel you are having a mental health emergency call the Colorado Crisis Services 1-844-493-8255, or the 24hr National Suicide Prevention Lifeline 800-273-8255. If you feel you are having a life or death emergency, dial 911 or check yourself into the nearest hospital emergency room.

By signing this form, I acknowledge that I have read the above information and understand my rights as a client and that I have asked any questions I have about this form:

Client or Parent/Guardian Signature

Date

Client or Parent/Guardian Signature

Date