

Value. Quality Care. Time Well Spent.
Existential Analysis Counseling and Psychotherapy Services
Serving Maple - Woodbridge - Vaughan Area
Inside Out Wellness Centre
Address: 3560 Rutherford Rd., Unit 45, Woodbridge, ON L4H 3T8
Tel.: 905-303-4622

INFORMED CONSENT FOR PSYCHOTHERAPY TREATMENT

Name _____

Date of Birth _____

Address/Tel./E-mail

I understand that as a client of INSIDEOUT WELLNESS CENTRE - EXISTENTIAL ANALYSIS COUNSELING AND PSYCHOTHERAPY SERVICES provided by

Registered Psychotherapist ANDREEA C. MADARAS

the type and extent of services that I will receive will be determined following an initial assessment and thorough discussion with me. The goal of the assessment process is to determine the best course of treatment for me.

Typically, treatment is provided over the course of several weeks or months. I understand that if I do not show up to a scheduled session or cancel my appointment with less than 24 hour notice, this will count against my total number of sessions.

I understand that all information shared with the Registered Psychotherapist (RP) is confidential and no information will be released without my consent.

My psychotherapy treatment records are stored in a secure way and treated with strict confidentiality. Access to these records by other health or mental health care providers is done only on a need to know basis (e.g., referral for medication, diagnosis, evaluations, follow up requests, etc.). In all other circumstances, consent to release information is given through written authorization. Verbal consent for limited release of information may be necessary in special circumstances.

Existential Analysis Psychotherapist – Andreea C. Madaras, MA, RP –
Clinical Member OSP, Registered Psychotherapist CRPO
Contact: Tel. 416-389-8637, E-mail: andreea_madaras@yahoo.com

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I further understand that there are specific and limited exceptions to this confidentiality which include the following:

- A. When there is risk of imminent danger to myself or to another person, the RP is ethically bound to take necessary steps to prevent such danger.
- B. When there is suspicion that a child or elder is being sexually or physically abused or is at risk of such abuse, the RP is legally required to take steps to protect the child or elder, and to inform the proper authorities.
- C. When a valid court order is issued for medical/psychotherapy records, the RP is bound by law to comply with such requests.

I understand that while psychotherapy and/or medication, may provide significant benefits, it may also pose risks.
Psychotherapy may elicit uncomfortable thoughts and feelings, or may lead to the recall of troubling memories.
Medications may have unwanted side effects.

I understand that I may stop the psychotherapy treatment at any time.

If I have any questions regarding this consent form, the process of psychotherapy treatment, the specific method of Existential Analysis Psychotherapy, the practice and the services offered by Andreea C. Madaras, MA, RP, I may discuss them with her.

I have read and understand the above. I consent to participate in the evaluation and treatment offered to me by Andreea C. Madaras, MA, RP.

Signature

Date
