

**Craig P. Wagner, Ph.D.**  
**Three Pointe Drive, Suite 314 Brea, CA 92821 (714) 672-9470**

## CONSENT FOR TREATMENT

I, \_\_\_\_\_, authorize and request that Craig P. Wagner, Ph.D. (PSY16195) provide psychological examinations, treatment and/or diagnostic procedures which now or during the course of my care as a patient are advisable. The frequency and type of treatment will be decided between my therapist and me.

I understand that the purpose of these procedures will be explained to me and be subject to my verbal agreement.

I understand that there is an expectation that I will benefit from psychotherapy but there is no guarantee that this will occur.

I understand that maximum benefit will occur with consistent attendance and that at times I may feel conflicted about my therapy as the process can sometimes be uncomfortable.

I understand that appointments must be canceled 24 hours in advanced. Otherwise a full standard charge will be made directly to the client.

I understand that all therapy sessions are kept strictly confidential. This confidentiality includes any consultation Dr. Wagner seeks on your case.

I understand confidentiality and privileged communication remain the rights of all clients according to state law. However, there are limits to confidentiality, such as, when a therapist is subpoenaed by court, or when it is mandated by law. The following are major areas where confidentiality is limited:

California state law mandates the reporting of incidences of child, elder, and dependent elder abuse including physical abuse, sexual abuse, unlawful sexual intercourse, neglect, emotional and psychological abuse. All actual or suspected acts of such abuse will need to be reported to the appropriate agency.

Some courts have held that if an individual intends to take harmful, dangerous, or criminal action against another human being, or against themselves, it is the psychologist's duty to warn appropriate individuals of such intentions. Those warned may include a variety of persons such as: the person or family of the person who is likely to suffer the results of harmful behavior; the family of the client who intends to harm himself or someone else; associates or friends of those threatened or making threats; and Law Enforcement officials. Before informing anyone who should be warned, the psychologist will take all possible steps to share that intention with the client. Every effort will be made to resolve the issue with the client so as to prevent such breach of confidentiality.

Date: \_\_\_\_\_ Client's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Witness: \_\_\_\_\_