

Todd S. Larsen, Ph.D.
Licensed Psychologist

Informed Consent and General Information About Your Psychology Appointment

Welcome to my practice. This document contains important information about my professional services and business practices. Please read it carefully and jot down any questions you might have so that we can discuss them.

Purpose and Nature of Services to be Provided: Psychologists help patients with mental or emotional difficulties such as depression or anxiety, interpersonal or family problems, personality problems, adjustment difficulties, grief recovery, rehabilitation, or when psychological factors may affect physical symptoms such as pain. I provide multiple services including: consultation, psychotherapy, psychological testing and assessment services, along with forensic services (in the context of providing expert testimony).

Psychology consultation and psychotherapy is intended to help the individual reach a better understanding of specific problems and, at times, work toward resolution of this problem, symptom relief, improvement in day to day functioning, or simply offer support in problem solving.

Psychological testing and assessment services are sometimes an important service provided if the consultation request is to clarify a diagnosis, make treatment recommendations, assess the degree of current impairment, or as a part of legal proceedings.

In the case of a referral for a forensic evaluation, you will complete a clinical interview, a range of selected psychological tests (e.g., objective and projective personality testing, cognitive testing, neuropsychological testing, and achievement testing), and a mental status examination. Given the time necessary to complete a forensic evaluation, it may well necessitate several separate appointments. Please see the note below about the lack of confidentiality in the case of forensic evaluations and expert review.

Methods and Procedures (and Risks and Benefits): Initially, a psychologist will conduct a clinical interview---a guided discussion---with the patient to assess the nature of the problem. In the case of a child, this interview will primarily be conducted with the child's parent(s), usually without the child present. Sometimes the patient will be asked to complete psychological testing to gather additional information about cognitive ability, symptom type and severity, memory, or personality functioning. Outside records or discussion with important family members will sometimes be requested (for which a release of information will be necessary).

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Psychological therapy, or psychotherapy, is a joint effort between the psychologist and the patient to alleviate the problem. Progress depends on many factors such as the complexity and duration of the problem, the skill of the psychologist, the motivation of the patient, and other life and situational circumstances. While results cannot be guaranteed, most patients/clients find that they benefit from psychotherapy.

The therapist and the patient/client should agree on specific goals for therapy such as symptom reduction, improved communication and/or interpersonal skills, ability to return to work, or the like. Goals will in all likelihood change as the therapy progresses and should be renegotiated accordingly. The therapeutic approach employed will vary and should be discussed directly with the psychologist. The approach I employ most frequently is referred to as cognitive-behavioral therapy, a therapeutic approach that targets our belief systems and related behavioral difficulties.

As with any powerful treatment, there are some risks as well as many potential benefits. You should always think about both the risks and benefits before making a treatment decision. If you are involved in psychological testing, regardless of whether or not it is for a forensic evaluation, it can lead to fatigue and emotional depletion. Therapy can result in some individual change and unleash strong feelings. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of sadness, anger, guilt, anxiety, frustration, loneliness, helplessness or other negative feelings. Clients may recall unpleasant memories. These feelings or memories may bother you at work, school, or home. Also, some people in the community may erroneously view anyone in therapy as weak, or perhaps seriously ill or even dangerous. Also, clients may have problems with people that are very important in their lives. You should be aware of the possibility for potential family and/or marital strain that may occur during therapy. Family secrets may be told. Therapy may disrupt a marital relationship and sometimes may even lead to separation or divorce. Sometimes, too, it is possible for a client's problems to worsen immediately after beginning therapy. Most of these risks are to be expected when people are making important changes in their lives. Finally, it is important to note that, even with the best effort on the part of both of us; therapy may not work out well for you. [For individuals that have chronic problems involving suicidal behavior \(e.g. repeated suicide attempts\), one of the risks of outpatient psychotherapy is death, although this is infrequent and relatively rare in outpatient care. If you've experienced suicidal thoughts and/or engaged in suicidal behavior in the past \(or are currently experiencing one or both of these problems\), the possibility of a suicide attempt during outpatient care exists. Again, the rates of suicide attempts during outpatient treatment are difficult to estimate, but are relatively low. We will talk more specifically about the issue of suicidal thoughts and behavior in our *commitment to treatment agreement*. In particular, we'll come to an agreement about how to address suicidality in treatment, particularly the use of a *crisis response plan*.](#)

If you are involved in a forensic evaluation, it is important for you to recognize that you may not agree with the findings and subsequent reports or court testimony. This will

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potentially be quite upsetting and may well result in significant changes in your life (e.g., court decisions regarding your complaint, custody dispute, etc...). Depending on the purpose of the forensic evaluation (i.e., expert opinion, competency assessment, custody evaluation, or commitment proceeding), the findings will be presented in court and potentially have an impact on the subsequent decision. As a result of presentation in open court, the findings can become public record (if appropriate, also see copy of related statement detailing the lack of confidentiality in forensic cases). It is recommended that you discuss this issue in detail with your attorney if you have related legal questions. If you do not have an attorney, you may to consult with one regarding forensic evaluations and related expert testimony.

Treatment frequency and duration will vary from individual to individual and the specific problem(s) targeted. An estimate of treatment duration can be provided, but you are reminded that it is only an estimate. Treatment duration will vary depending on what you hope to accomplish. Shorter-term treatments routinely target symptom relief and a return to baseline functioning. Enduring changes in longstanding patterns of behavior or chronic problems will naturally require longer-term care. You have the right to withdraw from treatment at any time and if you are dissatisfied with the nature of treatment progress, an alternative referral will be provided.

Our first few sessions will involve an evaluation of your needs. For some individuals we will agree to an extended evaluation process of up to six sessions. By the end of the evaluation, I will be able to offer you some first impressions of what our work will include and a treatment plan to follow, if you decide to continue with therapy. It's important to remember that an extended evaluation is NOT an agreement for ongoing therapy. At the end of the evaluation process, we'll discuss the outcome, my diagnostic impressions and whether or not I can provide the treatment services (i.e. type of care, necessary frequency, and/or duration) required in your individual case. You should evaluate this information along with your own opinions of whether you feel comfortable working with me. Therapy involves a large commitment of time, money, and energy so you should very careful about the therapist you select. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you set up a meeting with another mental health professional for a second opinion.

Confidentiality: Information conveyed to the psychologist in a professional setting is confidential and with a number of exceptions **will not be discussed without your written consent.**

Exceptions to confidentiality include the following:

1. If the patient/client is evaluated to be a danger to self/others,
2. If your psychologist was appointed by the court to evaluate you,
3. If the patient/client is a minor, elderly, or disabled and the psychologist believes he/she is a victim of abuse, or, if the patient/client divulges information about such abuse,

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4. If the patient/client files suit against the psychologist for breach of duty,
5. If a court order or other legal proceedings or statute requires disclosure of information,
6. If the patient/client waives the rights to privilege or gives written consent to disclose information,
7. Anonymous disclosures for audits, evaluations, or research without personally identifying information,
8. To third party payers (i.e., insurance companies) or those involved in collecting fees for services,
9. Disclosures to other professionals or supervisees **directly** involved in your treatment or diagnosis.
10. Information contained in communications via mechanisms/devices with limited security/control, such as e-mail and telephone conversations/contact.

Many of these situations rarely occur and, should the situation arise, I will make every effort to discuss it fully with you before a release takes place. I may occasionally find it helpful to consult about a case with other professionals regarding treatment, diagnosis, or other pertinent issues. In these consultations, I make every effort to keep identifying information confidential. The consultant is, of course, legally bound to keep the information confidential. Unless you object, I will not tell you about these consultations unless I feel it is important to our work together.

While the above exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have. The laws governing these issues are quite complex and I am not an attorney. While I am happy to discuss these issues with you, should you need specific legal advice, legal consultation is recommended.

In cases of forensic evaluations, see the attached statement regarding the complete lack of confidentiality.

Records: Documentation of all visits are kept permanently. This consists of a summary of each meeting with the psychologist including general issues addressed, symptoms, level of functioning, mental status, diagnosis, and future plans. Both law and standards of practice require that I keep appropriate treatment records. You are entitled to receive a copy of the records, but if you wish, I can prepare an appropriate summary. Because these are professional records, they can be misinterpreted and/or can be upsetting to lay readers. If you wish to see your records, I recommend that you review them in my presence so that we can discuss the contents and answer any questions. I am sometimes willing to do so without charging a fee.

Billing and Fees: Fees are \$125.00 per hour for individual and marital therapy. Family therapy is \$150.00 per session. Psychological testing services are billed at \$175 per hour. Forensic services are billed at \$200 per hour, including activities such as chart review, travel, clinical assessment of individuals, or testimony provided. Forensic services are

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not reimbursable by insurance. You will be billed for the appropriate co-pay amount if you are using insurance coverage. I will clarify any questions about fees or collection policies.

You will be expected to pay for each session at the time that it is held, unless we agree otherwise or unless you have insurance coverage which requires another arrangement. It is also important to recognize that if your insurance carrier denies payment for any reason, you are still responsible for paying your bill. Payment schedules for other professional services will be agreed to at the time these services are requested. In circumstances of financial hardship, I am willing to negotiate a fee payment schedule or installment payment plan.

If possible, appointments should be cancelled at least 24 hours in advance. You can call 210-522-1187 to cancel an appointment (24 hours per day). You may be charged for appointments not canceled 24 hours in advance. Your insurance company will not cover any unkept appointments.

Insurance Reimbursement: In order for us to set realistic treatment goals and priorities, it is important to evaluate what resources are available to pay for your treatment. If you have health insurance, it will usually provide some coverage for mental health. I will provide you with whatever assistance I can in facilitating your receipt of benefits to which you are entitled including filling out the appropriate forms. However, you (and not the insurance company) are responsible for full payment of your account. Therefore, it is very important for you to find out exactly what mental health services your insurance policy covers. You are responsible for obtaining prior authorization for treatment from our insurance carrier, if required by the carrier.

You should carefully read the section in your insurance booklet that describes mental health services. If you have questions, call your plan administrator. Of course, I will provide you with whatever information I can based on my experience. You always have the right to pay for services and avoid the complexities of insurance filing. If you prefer that we file your insurance for you, we will do this free of charge. We bill insurance once per month. Your insurance company should send you an explanation of benefits regarding our billing and the coverage they allow.

Due to the rising costs of health care, insurance benefits have increasingly become more complex. It is sometimes difficult to determine exactly how much mental health coverage is available. Managed care plans such as HMO's and PPO's often require authorization before they provide reimbursement for mental health services. These plans are often limited to short-term treatment approaches designed to work out specific problems that interfere with a person's usual level of functioning. It may be necessary to seek approval for more therapy after a certain number of sessions. While a lot can be accomplished in short-term therapy, some patients' feel that they need more services after insurance benefits end.

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You should be aware that most insurance companies require you to authorize me to provide them with a clinical diagnosis. Sometimes I have to provide additional clinical information such as treatment plans or summaries, or copies of the entire record (in rare cases). This information will become part of the insurance company files and will probably be stored in a computer. Though all insurance companies claim to keep such information confidential, I have no control over what they do with it once it is in their hands. In some cases, they may share the information with a national medical information databank.

Once we have all of the information about your insurance coverage, we will discuss what we can expect to accomplish with the benefits that are available and what will happen if they run out before you feel ready to end treatment.

Minors: If you are under eighteen years of age, please be aware that the law may provide your parents the right to examine your treatment records. It is my policy to request an agreement from parents that they agree to give up access to your records. If they agree, I will provide them only with general information about our work together, unless I feel there is a high risk that you will seriously harm yourself or someone else. In this case, I will notify them of my concern. I will also provide them with a summary of your treatment when it is complete, if they wish. Before giving them information, I will make every effort to discuss it with you.

Availability and Hours: My office hours are generally 9 am to 6 pm, Monday through Friday. However, I can be reached 24 hours/day through an emergency messaging service at 210-522-1187. Emergency services are always available through the Methodist, The Nix, and Medical Center Emergency Rooms. For those taking medications, it is important to coordinate directly with your physician or psychiatrist. For those needing a referral, I have a number of psychiatrists that I collaborate with and can provide referrals as needed. I cannot return phone calls immediately and often times will not be able to listen to my messages until the end of the work day. Accordingly, it's important for you to follow your crisis response plan when needed or indicated. If you have need for periodic phone contact, we'll discuss a specific plan in more detail.

Qualifications: I am licensed by the Texas State Board of Examiners of Psychologists and have been practicing for over 25 years. I completed my graduate training (Masters Degree and Ph.D. Degree) in Clinical Psychology at Utah State University. I completed an internship in clinical psychology at Wright Patterson Medical Center in Ohio, and completed post-doctoral training in cognitive and behavioral therapy through The Harvard Medical School in Boston, Massachusetts. I have held positions on the faculty of Wilford Hall Medical Center Department of Psychology and in the Departments of Pediatrics and Family Practice at The University of Texas Health Science Center at San Antonio. I have been in private practice in San Antonio since 1989.

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