

**LIFE COUNSELING AND PLAY THERAPY**  
CONSENT TO TREATMENT / EVALUATION

With your mental health professional, Karla McDermott, LCSW, RPT, you will be planning your treatment/evaluation for ways to address the concerns that bring you to Life Counseling and Play Therapy. You may be asked to sign initial and periodic treatment plans. Through these treatment plans individual and / or family therapy will be used to assist you in achieving your goals.

Evaluation and therapy can be emotionally challenging and may temporarily increase some symptoms as problems are addressed. Certain mental conditions may have medical or biological origins or contributions. Karla McDermott does not practice medicine, surgery or prescribe medication. Karla McDermott, LCSW, RPT will consult with your primary care physician if you choose to sign a release of information allowing such communication.

Your treatment/evaluation information will be confidential and will not be released without your written consent. There are some exceptions however. By law, you cannot expect confidentiality in situations involving intent to harm self or others, suspected child abuse, court subpoenas or when the treatment / evaluation is court ordered.

If you choose to use insurance benefits, Life Counseling and Play Therapy needs your consent to release necessary information to your insurance company so that they may process your claim. If you are using insurance benefits, please initial and sign to provide such consent.

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I have read the above information regarding clinical services and hereby consent to treatment/evaluation.

\_\_\_\_\_  
(Signature of client or parent)

\_\_\_\_\_  
(Date)