

JUDI BLOOM, Psy.D.
Doctor of Clinical Psychology

Dr. Judi Bloom

11500 W Olympic Blvd ste 420
Los Angeles, Ca. 90064

GUIDELINES

Confidentiality

Whatever transpires in our sessions is strictly confidential. I will not release any information about you or your therapy without your written permission. According to the Law, I must inform the proper authorities if you intend to harm yourself or other person(s), or if you disclose information relating to child or elder abuse where a current danger exists.

Length of Sessions

Our time together is set for 50 minutes. Because I schedule patients for every hour, it is important that we end on time so I can make my next appointment. Thus, in order to maximize our time together, please arrive for your session on time.

Payment

We have agreed upon your fee. Please pay for every session by personal check or cash. It would be to your advantage to have your payment prepared prior to our meeting to maximize our time together.

I will provide you with forms to send to your insurance company for reimbursement.

Fees

If your fees have been set to anything lower than my customary hourly rate, it will be raised until it meets that fee as your income or financial circumstances improve.

Rescheduling

I understand that emergencies arise that might prevent you from attending a scheduled session. I require a 24-hour advance notice, or you must pay for the session.

I will make every reasonable effort to honor your rescheduling needs. If you reschedule, you will be expected to keep your next regularly scheduled appointment as well.

Phone Calls

I am available to assist you by phone, when necessary, for up to 5 minutes at no extra charge. I ask you to limit your phone calls or we can agree to have a phone session. I will honor your need for an emergency session if at all possible.

Termination

When the time comes for us to complete the work we have done together, it is very important that we allow 1 to 3 sessions for closure. During this time we will evaluate what's been accomplished, see what areas might be looked at in the future, and provide for a mutual understanding about follow up sessions that you might desire in the future. I want you to feel comfortable calling me, even if it is after a long absence.

I view our association as an important relationship. If you feel you benefit from our time together, I certainly welcome your referral of others.

I have read and understand the above guidelines.

Date: _____

Client: _____

Date: _____

Therapist: _____