

ATHENA STAIK, Ph.D., LMFT

Licensed Marriage and Family Therapist

Life Transformations
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INFORMED CONSENT TO INDIVIDUAL, COUPLE, GROUP TREATMENT

The following information is provided to offer you a clear understanding of my background and services, office policies, and your rights. Please read the information carefully and feel free to ask questions.

Biographical Information about Dr. Staik. I hold a Doctor of Philosophy degree in Marriage and Family Therapy from Florida State University, a Master of Arts in Psychology from the University of West Florida, and a Bachelor of Arts in Psychology from the University of Maryland. I am a licensed marriage and family therapist (LMFT) in Virginia (#0717001136), with more than 10 years experience providing individual, couple, family and group psychotherapy, and dealing with a wide range of issues to include depression, anxiety, trauma, stress, addictions, eating disorders, grief, self-esteem and emotional difficulties, family conflict, and relationship issues. I use several strengths-based models to include experiential, narrative, emotion-focused, family systems, attachment, solution-focused, cognitive-behavioral and Adlerian holistic lifestyle approaches. I am also a certified life coach, specializing in life and relationship consulting for emotion regulation, performance enhancement, and emotional intelligence. My experience includes 12 years as an adjunct professor teaching in the disciplines of psychology, family science and sociology.

Confidentiality. The information you provide will be treated confidentially and will not be made available to individuals or agencies without your written consent. If the client is less than 18 years of age, a parent or guardian must provide written consent. There are instances in which confidential information can or must be released without your consent. These instances are as follows:

- **Abuse.** If there is suspected child abuse, elder abuse, or dependent adult abuse.
- **Serious threat to others.** A situation in which serious threat to a reasonably well-identified victim is communicated to the therapist.
- **Serious threat to self.** When threat to injure or kill oneself is disclosed by client.
- **Insurance.** When you are required to sign a release of confidential information by your medical insurance.
- **Court subpoena.** When you are required to sign a release for psychotherapy records if you are involved in litigation or other matters with private or public agencies.
- **Couple, family, and group work.** Clients being seen in couple, family, and group work are obligated legally to respect the confidentiality of others. The therapist will exercise discretion (but cannot promise absolute confidentiality) when disclosing private information to other participants in your treatment process. Secrets cannot be kept by the therapist from others involved in your treatment.
- **Consultation.** I may at times speak with professional colleagues about our work without asking permission, but your identity will be disguised.
- **Children.** Clients under 18 do not have full confidentiality from their parents.
- **Electronic communication.** Most records are stored in locked files but some are stored in secured electronic devices. Cell phones, portable phones, faxes, and e-mails are used on some occasions. All electronic communication risks a compromise of confidentiality.
- **Writings, publications.** I write and publish case studies of my work with clients; in all cases, however, no identifying information is disclosed.

In cases in which information must be released without your consent, every attempt will be made to notify you beforehand.

Minors and Confidentiality. Communications between therapists and clients who are minors (under the age of 18) *are confidential*. However, parents and other guardians who provide authorization for their child's treatment are encouraged to be involved in their treatment. Consequently, I may discuss

