**Brenda Petrie Psychotherapy & Consulting**

A Division of 1528762 Alberta Ltd.

**Limits of Confidentiality**

Name of Client: \_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Provider: Brenda Petrie, Registered Psychologist

Your provider will treat with great care all the information shared. It is your legal right that therapy sessions and all records of treatment about you are kept private. Information discussed in the therapy setting is held confidential and will not be shared without written permission except under the following conditions:

1. The provider has reasonable and probable grounds to believe that disclosure is necessary to prevent immediate and grave harm to the client or another person’s mental or physical health or safety. This includes threats of suicide, including ideation, or threats of harm to self or another person(s).
2. The provider has reasonable and probable grounds to believe that a child is in need of intervention, including but not limited to physical, sexual, emotional, and psychological abuse. Reporting is a legal obligation under section 4(1) of the *Child, Youth & Family Enhancement Act.*
3. The records are subject to court subpoena and must be released in accordance with a court order or federal or provincial laws, rules or regulations.

National and provincial law mandates that mental health professionals must report these situations to the appropriate persons and/or agencies. Communication between the psychologist and the client will otherwise be deemed confidential as stated under the laws of the province of Alberta, Canada.

There are also two situations in which your provider might talk about part of your case with another therapist. First, when your provider is away from the office for more than a few days, a fellow therapist may “cover”. This therapist will be available to you in emergencies. Therefore, he or she needs to know about you. Of course, this therapist is bound by the same laws and rules in protecting your confidentiality. Second, sometimes therapists consult with other professionals about their clients. This helps therapists provide the best treatment possible. These persons are also required to keep your information private. Your name will never be given to them, some information may be changed or omitted, and they will be told only as much as they need to know to understand your situation.

It may be beneficial for your provider to confer with your physician with regard to your psychological treatment or to discuss any medical problems for which you are receiving treatment. Please check one of the following:

□ Brenda Petrie is authorized to contact my physician to discuss the treatment I am receiving and to obtain information concerning my medical diagnosis and treatment. My physician information is:

Name of Physician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 □ I do not authorize contact with my physician.

 If your records need to be seen by another professional, or anyone else, your provider will discuss this with you. If you agree to share the records, you will need to sign an authorization form. This form states exactly what information is to be shred, with whom, and why, and it also sets time limits.

 Your provider will destroy your records ten years after the conclusion of therapy. Until then, your records will be kept in a safe and locked place.

Having read and understood the above, I agree to the limits of confidentiality.

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 Signature Date

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 Printed Name

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 Signature Date

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 Printed Name