

Informed Consent/Professional Disclosure Statement

This document is intended to inform you of my policies, state and federal laws and your rights. My name is Colleen Lhotsky Sullivan and I am a Licensed Professional Counselor in the state of South Carolina. I received my M.A. in Clinical Mental Health Counseling at Argosy University in D.C. in 2018. My business number is (843) 779-7492.

I work with children and teens incorporating expressive approaches to help find their natural way of communicating. I incorporate expressive therapies with a trauma informed, multicultural perspective using modalities of CBT, TF-CBT, and solution focused. Through incorporating expressive therapies, like play, art and music, this can help a child with trauma, anxiety, phobias, depression, defiance, anger, ADHD, and low self-esteem reveal unconscious fears, worries, thoughts and wishes.

I am appointment only Monday through Friday and will work with you to schedule a time that works best for everyone. I currently do not take insurance at this time.

This information is required by the Board of Professional Counselors which regulates all licensed professional counselors. To reach the board by mail, please write to the Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists, PO Box 11329, Columbia, SC 29211. Other ways of contact are by email, Contact.Counselor@llr.sc.gov or phone 803-896-4658.

Services and Pricing

Initial Diagnostic Assessment	1-2 hours needed	\$95
Parenting Assessment	1-2 hours needed	\$425
Individual Therapy/ Family or Couples Therapy	50-60 min session 16-30 min session	\$80 \$40
Parent Management Training Support	50-60 min session +3x fee of \$20 for AAPI	\$90

I accept cash, check and all major credit cards. I do not take any insurance at this time.

It is possible for services to be covered in full or in part depending on your current health insurance provider or employee benefit plan so please contact your provider to ask if your plan reimburses you for psychotherapy services.

I am able to provide a superbill for insurance reimbursement purposes, as needed.

Cancellation Policy: Client's must cancel an appointment at least 24 hours before the time of the appointment. If a client does not cancel in time or show up for their session, they will be charged for the appointment.

Confidentiality

Client information shared with me is confidential, except in the following circumstances:

- Mandated reporting of abuse of children or adults
- Threats of suicide or homicide
- Cases where you have signed a release of information
- Information released as outlined in the HIPAA Notice and those required by law.

Your treatment program may be discussed with other professionals for peer guidance and if that occurs, your confidentiality will be maintained. I adhere to Ethical and Professional standards outlined in the American Counseling Association, Code of Ethics.

Crisis/Emergencies: In the event of a behavioral/emotional crisis or true emergency, please contact:

- Crisis Hotline: Text HOME to 741741
- Go to the nearest emergency room
- Call 911 for immediate emergency care

Parent/Caregiver Print name Parent/Caregiver Signature Date

Client Print name Client Signature Date

Colleen Lhotsky Sullivan, LPC

Therapist Therapist Signature Date