

INFORMATION FOR CLIENTS

Welcome to my practice. I appreciate you giving me the opportunity to work with you. This brochure answers questions that clients often ask about assessment. I believe our work will be most helpful to you when you have a clear idea of what we are trying to do.

This brochure is yours to keep. Please read all of it. Mark any parts that are not clear to you. Write down any questions you have, and we will discuss them at our next meeting. When you have read and fully understood this brochure, I will ask you to sign it at the end. I will sign it as well and make a copy, so we each have one.

Making Appointments

Your evaluation may be scheduled by me (Dr. Rapkoch), and in some cases a third party, such as a referral source or a case manager. If you have questions about the process, costs, time, date, or location of your evaluation please contact me directly at 503-680-6111. This voicemail is confidential and only accessed by me.

I also have an email account, Dr@ElizabethRapkoch.com, that you can use to inquire about services or to schedule or cancel appointments. However, please be aware that email communication is not secure and any communication that you engage in via email is at your own risk. Due to the lack of security in sharing information over email, I request that you not provide confidential or sensitive information over email and that you not use email as a form of communication in emergencies. I strongly urge you to consider the potential risks before using email to communicate with me.

About Psychological Assessment and Evaluation

Psychological assessment or evaluation can be a very helpful tool to identify areas of strength and challenges, and to identify strategies or recommendations for addressing those areas. The goal is for me to obtain information about you through a number of sources of information, so that I may provide you with the most accurate results and the most helpful recommendations related to the reasons you are coming to see me.

If you have been referred for the evaluation by another person or agency, I will ask for your permission to send the report to that person/agency, so that they may use these results in assisting you to the best of their ability. *You have the right to refuse to let me send the evaluation to them; however, in some circumstances, I may not be able to provide the evaluation services if I cannot share the results.* Please discuss this matter with me before the evaluation begins if you have any questions or concerns.

During the evaluation process, I will meet with you for an interview at which time I will explain the evaluation process and I will ask for information about many things about you. I may also ask for your permission to interview other people who may be able to provide me with additional helpful information, such as a doctor, a teacher, a parent, or partner. In addition to the interview, I may ask you to complete a number of tests that may include answering word questions, building

things with your hands, or asking about things you may have learned in school. You might also be asked to fill out questionnaires about yourself. The types of tests and activities we do will depend on the reasons you are coming in to see me.

The length of time the evaluation will take depends on the reasons you are receiving an evaluation and the number of tests we will be doing. The evaluation typically lasts between 6 and 8 hours, but may be longer or shorter.

The Benefits and Risks of Psychological Evaluation

As I mentioned previously, evaluations can be a helpful tool for understanding your strengths and challenges, and for identifying ways to improve your life. However, there are also risks associated with evaluations. You may feel tired after completing the evaluation session and you will likely find some of the questions or tasks to be challenging. You may also have thoughts or feelings come up before, during, or after the evaluation that may be uncomfortable or unpleasant. You may be dissatisfied with or dislike the results of the evaluation or the recommendations, and they may not provide you with the outcome you were hoping for. Additionally, the evaluation may include information that you would not want the person/agency that referred you to know. Because of these risks, it is important for you to think about and discuss with me, before we begin the evaluation, any concerns you have about the evaluation or about releasing the evaluation to the person who referred you.

In addition to risks in doing the evaluation, there may also be risks in *not* doing the evaluation. You may continue to experience your struggles without additional information that may be helpful for making changes in your life. Other people working with you may not be able to provide as much help or support to you because they may not know some important factors that affect you. Additionally, you may not be able to receive the services or support that would be beneficial if you do not complete the evaluation.

Considering the risks involved in psychological evaluation is important; however, the possible benefits of the evaluation are worth the risks most of the time. Generally, people seek evaluations to help figure out some difficulty they have been experiencing and to identify ways to improve on those difficulties. The evaluation process may help you understand the way you think and feel, and may identify strengths you have that may be used to help improve those challenges. Whether or not to complete the evaluation is up to you, and I encourage you to talk with me about any of your concerns about the process. I do not accept evaluation cases unless I believe I may be helpful. As such, I will enter the evaluation process with optimism about the ways in which the evaluation may be beneficial for you.

About Confidentiality

I will treat with great care all the information you share with me. It is your legal right that our sessions and my records about you be kept private. That is why I ask you to sign a “release-of-records” form before I can talk about you or send my records about you to anyone else. In all but a few rare situations, your confidentiality (that is, our privacy) is protected by federal and state laws and by the rules of my profession. Here are the most common cases in which confidentiality is not protected:

1. **Emergency Situations:** I may share information about you with other medical, mental health or law enforcement professionals or agencies in a medical or mental health emergency, or for follow-up after such an emergency.
2. **Future Harm:** I may share information about you with other medical, mental health or law enforcement professionals or agencies if I learn that you or someone else may be seriously harmed in the future (including possible suicide).
3. **Child Abuse, Elder Abuse, or Abuse of a Mentally Ill Adult:** There are times I may have to report to authorities if I learn about suspected abuse. This includes harm to a child, an elderly person; someone who is mentally ill, or someone who lives in a “long-term care facility,” such as a nursing home. Under Mandatory Reporting Law, child abuse includes physical abuse, neglect, mental injury or emotional maltreatment, sexual abuse or sexual exploitation, and threat of harm to a child, which may include exposure to domestic violence. I also have the right to release confidential information in order to cooperate with an investigation of potential abuse. I will comply with these laws and my ethical obligations to assure the safety of these people.
4. **Crimes Against Me:** I will report to the police any threat and/or crime by a patient towards me.
5. **Judicial or Administrative Proceedings:** If I am ordered to go to court, I may need to say things or provide information from your chart without your permission. This sometimes happens during child custody hearings, divorces, or investigations into other crimes.
6. **Access to Records by Non-Custodial Parents:** Both parents have rights to have access to a minor child’s chart. This applies if you are not married to the child’s other parent, and even if you have sole custody. Only the court can limit the right of non-custodial parents.
7. **Health Oversight and Complaints/Suits:** If a patient files a complaint or lawsuit against me, I may disclose relevant information regarding that patient in my defense.
8. **Delinquent Accounts Collection:** If your account is delinquent and I have made good faith efforts to recover fees, I may release relevant information to third parties for the express purpose of recovering fees for which you are responsible.

Additional Information Regarding Records

Except for situations like those I have described above, I will always maintain your privacy and will only release information with your written permission. If your records need to be seen by another professional, or anyone else, I will discuss it with you. If you agree to share these records, you will need to sign an authorization form. This form states exactly what information is to be shared, with whom, and why, and it also sets time limits. You may read this form at any time. If you have questions, please ask me.

It is my policy to destroy clients’ records 7 years after the end of our evaluation or treatment.

In some very rare situations, I may temporarily remove parts of your records before you see them. This would happen if I believe that the information will be harmful to you, but I will discuss this with you.

You have the right to ask me to make changes to the health information in your file. There may be times when I believe the information that you would like changed is accurate and complete as is, and I may chose not to change that information.

Evaluation of a Minor

Under Oregon law (Statute 109.675), children 14-years or older may request an evaluation without parental permission. Parents will, however, have access to any information in the file if requested if the child is still a minor under their care. There are some times when the parents may not have access to the records. Those situations may include if the child had been abused by the parent/guardian; if the child would be at risk of harm if the file was shared with the parent/guardian; or if the child is legally emancipated from the parents or has been living on his/her own and taking care of himself/herself for at least 90-days before the evaluation was requested. If you have any questions about this, please ask and we can talk about it.

Fees, Payments, and Billing

Payment for services is an important part of any professional relationship. You are responsible for seeing that my services are paid for.

Psychological testing services are billed at \$160 per hour. Psychological testing fees include the time spent with you, the time spent interviewing others, the spent reviewing your records, the time needed for scoring and studying the test results, and the time needed to write a report on the findings. The amount of time involved depends on the tests used and the questions the testing is intended to answer. An estimated amount for the testing will be provided to you when we schedule the first appointment.

The estimated cost of the evaluation is due at the time of our first meeting. Any additional fees incurred will be due when the report is delivered to you or released to a third party. If you think you may have trouble paying your bills on time, please discuss this with me. I will make every reasonable effort to negotiate a payment plan to resolve past due balances. However, if those balances continue to go unpaid, a 3rd party collection agency may be used.

Although I do not bill insurance companies directly, at your request, I will provide you with the necessary information to submit a request for reimbursement to your insurance company.

Emergencies

The person best able to help you in emergency situations is your primary clinician or therapist. As your evaluator, I am not your therapist and may not be available to you in emergency situations. If you find yourself in an emergency mental health situation and you do not have a therapist or cannot get in contact with your therapist, please call the crisis number in your local area. You can obtain this number through your case manager, or your local telephone book. If you cannot locate the number for the local crisis line, please either call 911 or go to your local emergency room.

Cancellation Policy

If you are not able to keep an evaluation appointment, you should cancel by phone (503-680-6111) at least 48 hours in advance. Please be advised that if you cancel your appointment we may not be able to schedule another appointment for a number of weeks. If you fail to cancel or to attend your appointment on two occasions, you may not be given further opportunity to participate in the evaluation.

Statement of Informed Consent for an Evaluation

I have read or have had read to me the information in this brochure. I have had the opportunity to talk with Dr. Rapkoch about the information and have had all of my questions answered. By signing this agreement I state that I understand the information in this brochure and I agree to act according to the points in this brochure. I agree to enter into an evaluation (or to have the client enter into an evaluation) with Dr. Rapkoch, as shown by my signature below.

Signature of client (or person acting for client)

Date

Printed name

- Relationship to client: Self Parent Legal guardian
 Health care custodial parent of a minor (less than 14 years of age)
 Other person authorized to act on behalf of the client - specify

I, the psychologist, have met with this client (and/or his or her parent or guardian) for a suitable period of time, and have informed him or her of the issues and points raised in this brochure. I have responded to all of his or her questions. I believe this person fully understands the issues, and I find no reason to believe this person is not fully competent to give informed consent to treatment. I agree to enter into an evaluation with the client, as shown by my signature here.

Elizabeth M. Rapkoch, PsyD
Licensed Psychologist

Date

- Copy accepted by client Copy kept by Dr. Rapkoch