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CONFIDENTIALITY STATEMENT

In general, the privacy of all communications between a client and a psychologist is protected by law, and I can only release information about our work to others if you sign a written Authorization form that meets certain legal requirements imposed by the Health Insurance Portability and Accountability Act (HIPAA). There are other situations that require only that you provide written, advance consent. Your signature below provides consent for those activities, as follows:

- I may occasionally find it helpful to consult other professionals about a case. During a consultation, I make every effort to avoid revealing the identity of my patient. The consultant is also legally bound to keep the information confidential. If you don't object, I will not tell you about these consultations unless I feel that it is important to our work together.
- I also may enter into formal business associate contracts with other people or entities that provide business and administrative services on my behalf. As required by HIPAA, those contracts include a promise that such associates will maintain the confidentiality of this data except as specifically allowed in the contract or otherwise required by law. If you wish, I can provide you with the names of these business associates and/or a blank copy of this contract.

There are some situations where I am permitted or required to disclose information without either your consent or Authorization:

- In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings in which your emotional condition is an important issue, a judge may order my testimony if he/she determines that the issues demand it.
- If I have reason to believe that a child has been abused, the law requires that I file a report with the appropriate governmental agency, usually the Department of Family and Child Services (DFCS). Once such a report is filed, I may be required to provide additional information.
- If I have reasonable cause to believe that a disabled adult or elder person has had a physical injury or injuries inflicted upon such disabled adult or elder person, other than by accidental means, or has been neglected or exploited, I must report to an agency designated by the Department of Human Resources. Once such a report is filed, I may be required to provide additional information.
- If I believe you are a danger to yourself or others, I will take protective actions to ensure your safety and the safety of others. These actions may include notifying the potential victim, contacting the police, seeking hospitalization for you and/or contacting family members or others who can help provide protection.

Licensed Psychologist Georgia #2041

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These situations have rarely occurred in my practice. If a similar situation occurs, I will make every effort to fully discuss it with you before taking any action.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have. I will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because the laws governing confidentiality are quite complex, and I am not an attorney.