

Alicia Pinkston, LMHC
633 3rd Ave. # 9B, New York, New York 10023
929-990-5935

Patient Rights

Our relationship is strictly voluntary, and you may leave at any time you wish. Please keep in mind that ending relationships can be difficult and closure is very important when moving on. Given this, I request that you give at minimum two week's notice so we can conclude with a healthy and positive note.

Payment and fees

It is customary to pay for sessions at the time of the session, unless otherwise arranged. Payments must be in full. Acceptable forms of payment are check, Venmo, and Zelle. Checks should be made payable to Alicia Pinkston.

Telephone Accessibility & Emergency Procedures

I will return calls during my scheduled business hours (Monday – Friday from 9am until 6pm) should you need to contact me between sessions. I can not guarantee an immediate return call, although every effort will be made to return calls within a reasonable amount of time. In the event of a phone session longer than 20 minutes, you will be charged for that session at the hourly fee. If you have a true, life-threatening emergency, call 911 for help or go to your local emergency room.

Appointments & Cancellation Policy

Individual Sessions are 50 minutes and couple's sessions are one hour long. Should you need to cancel or reschedule an appointment, 24 hour's notice is required in order to avoid being charged the full fee for the session. This is necessary because a professional time commitment is set aside and held exclusively for you.

LIMITS OF CONFIDENTIALITY

Contents of all therapy/life coaching sessions are confidential. Both verbal information and written records about you cannot be shared with another party without first obtaining your verbal and written consent. Noted exceptions to this are as follows:

Duty to Warn and Protect: If you disclose intentions or a plan to harm another person, Alicia Pinkston, LMHC is required to warn the intended victim and report this information to legal authorities. In cases in which you disclose or imply a plan for suicide, or homicide, Alicia Pinkston, LMHC is required to notify legal authorities and make reasonable attempts to notify your family and/or emergency contact.

Abuse of Children and Vulnerable Adults: If you state or suggest that you're abusing a child (or vulnerable adult) or have recently abused a child (or vulnerable adult), or a child (or vulnerable adult) is in danger of abuse, Alicia Pinkston, LMHC is required to report this information to the appropriate social service and/or legal authorities.

Prenatal Exposure to Controlled Substances: Alicia Pinkston, LMHC is required to report admitted prenatal exposure to controlled substances that are potentially harmful.

Minors/Guardianship Parents: Legal guardians of non-emancipated minors have the right to access the clients' records.

Insurance Providers (when applicable): Insurance companies and other third-party payers are given information that they request regarding your services. Information that may be requested includes, but is not limited to: types of service, dates/times of service, diagnosis, treatment plan, and description of impairment, progress of therapy, progress notes, and summaries.

I agree to the above limits of confidentiality and understand their meanings and ramifications. I have read understood and agreed to the conditions stated above:

Client Signature

Today's Date