

EDIE DIETZEN, M.A., M.S., L.M.F.T.  
800 A Officer's Row  
Vancouver, Washington 98661  
360-953-0169

#### WASHINGTON STATE LICENSE:

I am a licensed marriage and family therapist in the state of Washington, license #LF0002107. Obtaining this license requires a master's degree in a mental health field, 3000 hours of supervised counseling hours and successfully passing a Washington State License Exam. The license is renewable once a year. Every two years I must complete 36 hours of credit units in marriage and family therapy.

#### PURPOSES:

We will discuss your goals during our first few sessions. I agree to support you to try and achieve your goals in accordance with my professional skills and ethical standards. The ability to achieve these goals depends on our ability to work together effectively. Success cannot be guaranteed. You are responsible as a consumer of services to evaluate our progress: you have the right to refuse services or ask for a referral to another therapist at any time.

#### FEEES AND APOINTMENTS:

The fee for a 55-minute session is \$105.00. I do not charge for brief telephone calls; if they exceed 15 minutes there will be a pro-rated charge based on the regular fee. The same fee will be charged for missed appointments or cancellations made in less than 24 hours.

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### INSURANCE:

If your insurance plan covers services by a marriage and family therapist, you are responsible for arranging to have your insurance company reimburse you. I will work with you and the insurance company to assure success in coverage for you and myself.

### INCOME TAX ADVISOR:

Please check with your income tax advisor regarding therapy fees being tax deductible for medical expenses. Please also discuss transportation expense to and from my office.

### PHONE CONTACT AND EMERGENCIES:

I have a voice mail system available for you to leave confidential messages. I check for messages frequently and will return your call as quickly as possible. I am available during the day from 9:00 AM – 6:00PM to answer phone calls if I am not with a client. I am not always available evenings or on weekends, so if you need to reach me at those times, please let me know ahead of time, if possible, so we can accommodate each other with the necessary arrangements.

### VACATION TIME AND PROFESSIONAL ABSENCES:

On occasions, I am away from my office attending advanced trainings, professional conferences or taking vacation time. I will let you know in advance when I expect to be away. During these times, I will leave the name and phone number of a colleague or colleagues in my office complex who are available while I am away.

**CONFIDENTIALITY:**

All issues discussed in the course of treatment are strictly confidential. By Washington State Law, information concerning your treatment may be released only with your prior, written consent (unless you are under 13, then only with your parent or guardian's consent). However, the law requires the release of confidential information in three situations: suspected child abuse, potential suicidal behavior or threats to harm another person. The court may also subpoena records in other unusual circumstances. No information will be released for any reason without prior discussion.

If you should elect to use your health insurance benefits for psychotherapy or counseling, your diagnosis, symptoms, treatment plan, substance abuse issues (if any) and history will become part of your permanent medical record. These records are sometimes accessible to other parties such as insurance companies, employers, and private investigators. I cannot guarantee confidentiality of such records in these circumstances.

**PROCESS OF THERAPY AND ORIENTATION:**

We are each responsible for our own growth and change. Although I cannot guarantee a particular outcome, I can promise that I will devote my full attention to you during our time together. I consider it an honor and privilege to work together on the issues that life brings our way. I am committed to working with you as a competent, caring and responsible professional. Therapy might range from being a delightful release to a difficult process that requires changes challenging our belief systems and entire way of being. Therapy may be short term, intermittent or long term depending upon the pace at which you want

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to work together. I employ a combination of Narrative, Bowenian and Internal Family Systems theories. I will share the meaning around these theories as we meet together. We will agree together upon a meaningful theory that may work best for you.

The techniques I use are psychodynamic work, behavior modification, cognitive restructuring, play therapy and genogram work. I also use EMDR as a way to work with trauma, loss and life's challenges. I provide individual, couple, family and group therapy.

### EDUCATION, TRAINING AND EXPERIENCE:

I completed an M.S. degree in Counseling and Family Therapy from Seattle Pacific University in 1999. In addition to this degree, I hold an M.A. in Liberal Studies with a concentration in reading and psychology from Valparaiso University. I am a licensed Washington State teacher. I am a clinical member of the American Association of Marriage and Family Therapist. I am also a member of the Washington State Association for Marriage and Family Therapists. I hold membership in the American Association of Christian Counselors.

Each year I attend professional trainings, workshops and seminars to deepen my understanding and enhance my therapeutic skills. I have completed Advanced Training in Internal Family Systems with Dr. Richard Schwartz. I have also attended seminars given by Dr. David Schnarch, Michael White, David Epston, John Gottmann and leading educators in the field of Marriage and Family Therapy. I have attended workshops on trauma with such leaders in the field as Bessel van der Kolk.

Prior to becoming a Marriage and Family Therapist, I have worked as a

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school counselor for 15 years at a Christian school in Northshore School District. I have also taught kindergarten, first, third, fifth, sixth and junior high school between the years of 1966 – 1990. These teaching experiences have occurred in Indiana, Illinois and Washington State.

### RECORDS:

Washington Administrative Code gives you certain rights to access your treatment record. Please direct any inquiries about accessing your record to me.

You have the right to request that no records be kept other than the name, date of service, fee of service, signed disclosure form and written request that no records be kept. If you want to maintain only this minimal type of record, please sign here:

Client's Signature \_\_\_\_\_ Date \_\_\_\_\_

### CONSENT FOR TREATMENT:

Washington State regulations require that you read all sections of the Disclosure Statement and that you sign the following prior to beginning therapy. Please read the entire statement carefully or ask to have it read to you. If there is any part of this statement that you don't understand, please ask to have it clarified to your satisfaction.

Washington Administrative Code requires me to include the following statement:

“ Counselors practicing counseling for a fee must be registered or certified with the Department of Health for the protection of the public

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health and safety. Registration of an individual with the department does not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment.”

The purpose of the Counselor Credentialing Act (chapter 18.RCW) is “to provide protection for public health and safety and to empower the citizens of the State of Washington by providing a complaint process against those counselors who commit acts of unprofessional conduct.”

It also requires me to include a copy of the acts of unprofessional conduct as attached. If you have any questions you may contact the Department of Health at 360-236-4700.

I have been provided a copy of the required disclosure statement. I have read and understand the information provided.

Client’s signature \_\_\_\_\_ Date \_\_\_\_\_

Therapist’s signature \_\_\_\_\_ Date: \_\_\_\_\_