



*Office of Counseling and Health*

**Consent to Treatment Form**

Welcome to the Drexel University Counseling Center. We appreciate your trust and the opportunity to assist you. Please review this information carefully before signing at the end. If you have any questions please feel free to discuss them with your treatment provider.

**Benefits and Outcomes of Mental Health Treatment**

In addition to the gains and positive outcomes that are associated with counseling, sometimes there are also unanticipated effects. Because counseling, whether it be individual or group therapy, involves discussing issues that have or are presenting you with some difficulty, you may find: 1) that you are devoting more energy to focusing on your issue(s) 2) emotions that you had not experience before may be more available to you 3) you may see things in new or different ways which may be confusing; and 4) relationships may be affected as you examine interpersonal issues. These changes, albeit sometimes stressful in the beginning, can ultimately contribute to better self-understanding and more meaningful experiences.

**Appointments**

To best meet the needs of as many students as possible, the Center utilizes a short-term treatment model and offers a range of treatment, including group, workshops, and/or individual treatment. Clinicians will assess student's needs and will use clinical judgment to determine the most appropriate treatment modality and length of stay. Students who are determined to need longer term services and /or would be best served by an outside provider will be referred to other sources of assistance. It is important to arrive on time for your scheduled appointment. Students who are more than 15 minutes late for their appointments will be asked to reschedule their appointment.

If deemed appropriate, you may be referred to for a psychiatric evaluation with a psychiatrist. Medications can be helpful for certain mental health conditions when they are affecting your ability to function and/or care for yourself. If the psychiatrist recommends medications, the psychiatrist will review with you how the medication may benefit you, how it works, side effects of the medication and if any bloodwork is needed to monitor for side effects, alternatives to the recommended medication (including no medications) and expected outcomes of the alternatives, the medication's dose & frequency, drug interactions (if applicable) and any special instructions for taking the medication. You can then decide whether or not you would like to take the recommended medication in addition to therapy or continue with just therapy. If you do choose to take medications, it is important to take the medication exactly the way it is prescribed.

**No Show/Late Cancellation Policy**

We request 24 hours' notice when cancelling an appointment to help other students looking to schedule. Appointments not cancelled at least 2 hours in advance are considered "no shows." No Show appointments are counted as a missed session. Students who have three no shows in the same quarter will not be scheduled another appointment for counseling services for the remainder of the term. In this case, the Center can assist the student in finding a referral in the community.

**Therapists in Training**

In addition to having highly qualified and trained psychologists and therapists, we are also a training site for doctoral students in clinical and counseling psychology programs. The training year begins in July and ends the following June. They receive ongoing weekly supervision from a licensed staff psychologist. After your intake assessment, you may be referred to a trainee. If you have any questions or thoughts about this, please feel free to bring them up during the initial assessment.

**Notification of Recording**

Because of our training program, it is the policy of the Counseling Center to record therapy sessions. This recording allows effective review of your sessions and helps us provide the best service to you, our client. The recorded session is reviewed individually by your therapist and also with his/her supervisor. For purposes of licensure and professional certification, staff periodically is supervised and record their sessions. Therapists-in-training receive two types of ongoing supervision, individual and group, during which recorded sessions are reviewed. Recorded sessions are strictly confidential and erased after review.

We recognize there may be circumstances or reasons which prevent you from wanting to have your sessions recorded. If you have reservations concerning this recording, please discuss these concerns with your treatment provider.

I have read and understand that my therapy sessions will be recorded.

Signature: \_\_\_\_\_

**Consent to Treatment**

I have read the issues stated above, and discussed my questions and concerns. I fully understand and agree to comply with the conditions outlined in this consent form for treatment.

Client's Name (Please Print): \_\_\_\_\_

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

Therapist's Signature: \_\_\_\_\_ Date: \_\_\_\_\_