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PSYCHOLOGICAL ASSESSMENT

Psychological assessments are conducted for a variety of reasons, including education and career, treatment planning, diagnostic clarification, and qualification for services. A psychological assessment seeks to provide information about a specific question regarding psychological, cognitive, emotional, or personality functioning, using standardized and empirically supported tools chosen by the clinician. Psychological assessments usually consist of an interview, several testing sessions, a feedback session to go over the results, and a written report. The overall time required to complete the assessment depends on the nature of the assessment and the referral question that is being addressed.

TIMEFRAME

Evaluations typically take approximately 9 hours. The evaluation may be shorter or longer depending on the specific questions to be addressed. Once the evaluation is complete, we will schedule a 1- to 2-hour appointment to discuss the results and analysis of the assessment.

If an appointment is scheduled, you will be expected to pay for it (at the hourly rate) unless you provide 24 hours advance notice of cancellation (unless we both agree that you were unable to attend due to circumstances beyond your control).

CONFIDENTIALITY

In general, the privacy of all communications between a patient and a psychologist is protected by law, and I can only release information about our work to others with your permission. Exceptions are summarized below.

In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order my testimony if he/she determines that the issues demand it.

There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about a patient's treatment. For example, if I believe that a child, elderly person, or disabled person is being abused, I am legally required to file a report with the appropriate state agency.

If I believe that a patient is threatening serious bodily harm to another, I am legally required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the patient. If the patient threatens to harm himself/herself, I may be obligated to seek hospitalization for him/her or to contact family members or others who can help provide protection.

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.

I regularly consult other professionals about cases. During a consultation, the identity of my patient may be revealed. The consultant is also legally bound to keep the information confidential. If you do not object, I will not tell you about these consultations unless I feel that it is important to our work together.

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 at our next meeting. 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.

CONTACTING ME

My telephone number is 203-939-3001. Note, however, that I am often not immediately available by telephone. While I am usually in my office between 9 AM and 5 PM, I probably will not answer the phone when I am with a patient. When I am unavailable, my telephone is answered by a voicemail that I monitor frequently. I will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If you are unable to reach me and feel that you cannot wait for me to return your call, contact your family physician or the nearest emergency room and ask for the psychologist or psychiatrist on call. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

PROFESSIONAL RECORDS

The laws and standards of my profession require that I keep treatment records. You are entitled to receive a copy of the records unless I believe that seeing them would be emotionally damaging, in which case I will be happy to send them to a mental health professional of your choice. Because these are professional records, they can be misinterpreted or upsetting to untrained readers. I recommend that you review them in my presence so that we can discuss the contents. Patients will be charged an appropriate fee for any time spent in preparing information requests.

RISKS AND BENEFITS

Psychological testing has some risks and benefits. Testing can help clarify the diagnostic profile, identify cognitive and academic strengths and weaknesses, and more. One potential risk is that the client may experience stress or fatigue from the testing process. Also, the examiner creates an evaluation report based upon findings and clinical impressions. The findings/impressions may be at odds with the clients expectations. It is important to note that the report will not be changed substantively after it is written, unless there are factual errors.

MINORS

If you are under eighteen years of age, please be aware that the law may provide your parents the right to examine your records. I will provide them with a report of your evaluation when it is complete.

CONSENT FOR EVALUATION

Your signature below indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

I, _____, consent to the following services _____
_____.

Patient Signature

Date

Parent/Guardian Signature (if needed)

Date