

Julie Visnich, LCSW, LAC
1053 Main Ave #109A Durango, CO 81303 970-769-8397

DISCLOSURE STATEMENT

DEGREES AND CREDENTIALS

MSW University of Denver
Licensed Clinical Social Worker, Colorado License #1375
Licensed Addictions Counselor, Colorado License ACD #299

The practice of both licensed and unlicensed psychotherapists is regulated by the Department of Regulatory Agencies (DORA) under CRS 12.43.214 (1) (c). Grievances may be addressed to:

Colorado State Grievance Board
1560 Broadway, Suite 1340
Denver, CO 80202
303-894-7769

Under the statute, 12.43.214 (1) (d) CRS, you are entitled to receive information about the methods of therapy, techniques used, the duration of therapy (if known), and the fee structure. You may seek a second opinion from another therapist or may terminate therapy at any time. In a professional relationship sexual intimacy is inappropriate and should be reported to the Grievance Board.

CONFIDENTIALITY

This statute states that information provided by a client during therapy sessions is legally confidential with the following exceptions:

1. Client consents in writing.
2. The disclosure is subpoenaed by the court.
3. The disclosure is to protect the health or safety of any person (yourself or others). This includes child abuse and neglect, domestic abuse or violence, and threats against others.
4. The disclosure is made to medical personnel in an emergency situation.

Violation of confidentiality laws is a criminal offense.

CONSENT TO TREAT

Psychotherapy and/or substance abuse treatment is not an exact science and as such there are no guarantees regarding your treatment. Your signature below indicates that you will not hold Julie Visnich liable for any legal or medical matters.

I have been informed of my therapist's credentials and understand my rights and responsibilities as a client.

Client Signature

Date

Therapist Signature

Date