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Child, Adolescent and Adult Psychiatry

Certified by the American Board of Psychiatry and Neurology in General Psychiatry

(818) 798-3786 | SunshinePsychiatry.com

Consent for Evaluation and Treatment

Welcome to my practice and thank you for entrusting your (or your child’s) psychiatric care to me. I am aware that choosing a psychiatrist is an important step in improving and enhancing your (or your child’s) well-being. I hope to establish a strong therapeutic alliance with you and any involved family members in order to help you reach your optimal health potential. Please take some time to review the information below and do not hesitate to speak to me if you have any questions.

Compatibility and the Right Fit: Finding the right psychiatrist with whom you feel comfortable is crucial. You should be able to communicate openly and honestly with your psychiatrist and ask questions about any issues that come up during the course of your care and treatment. You are free to change providers at any time and may ask for a referral. I am committed to helping my patients in whatever way I can and will work with you to find someone with whom you feel comfortable.

Confidentiality: Your confidentiality is extremely important and I will go to great lengths to protect your privacy. Patient confidentiality may be breached in special cases such as imminent self-harm or danger to others, suspected child abuse or elder abuse and court order to release information. This is especially true in the treatment of children and adolescents. Quite reasonably, many parents and caretakers want to know what transpired in therapy or medication management sessions. However, some degree of confidentiality is essential in order to develop a therapeutic alliance with minors (particularly adolescents). This alliance subsequently improves the quality of their psychiatric care.

Therefore, I will use my clinical judgment in deciding whether and when to relay information to parents. Typically, if the information needs to be discussed with parents, I would encourage the minor patient to discuss the matter in session with parents. In clinically urgent and emergent situations, I may relay the information to parents myself.

Appointment Times: Appointments will start and end at their schedules times, regardless of when the patient arrives for the appointment. Frequently, I will have patients scheduled back to back and will be unable to extend appointment times because it would be unfair to keep other patients waiting.

Availability: I respond to phone calls within one business day. I do not provide emergency services. If you are having a medical or mental health emergency, please call 911 or go to the nearest emergency room. Ronal Reagan UCLA Medical Center and Northridge Hospital Medical Center have emergency psychiatric services available.

Your signature below confirms that you have read, understand, and agree to the foregoing “Consent for Evaluation and Treatment.”

Signature: _____ **Date:** _____

Name (Print): _____