

## Limits of Confidentiality

I, \_\_\_\_\_, understand that information discussed in the therapy setting is held confidential and will not be shared without written permission except under the following conditions:

1. The client threatens suicide.
2. The client threatens harm to another person (s), including murder, assault, or other physical harm.
3. The client reports suspected child abuse, including but not limited to, physical beatings, and sexual abuse.
4. The client reports abuse of the elderly.
5. If a subpoena qualifies as a court order.

State law mandates that mental health professionals report these situations to the appropriate persons and/or agencies.

Communications between the therapist and the client will otherwise be deemed confidential as stated under the laws of this state.

Having read and understood the above, I agree to these limits of confidentiality.

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Signature

Date