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CORPORATE PEOPLEMAP™ TRAINING, PERSONAL & BUSINESS COACHING,
INDIVIDUAL & COUPLES PSYCHOTHERAPY

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THERAPY AGREEMENTS

Listed below are nine understandings or agreements that are important for our psychotherapeutic work to succeed. Please indicate your understanding and agreement by signing and retaining.

1. **The Goal of Therapy:** There are many different ways and words to describe the methods and goals of psychotherapy. I believe therapy is well-described as the process of moving from slavery to one's past to the freedom of living well in the present; it is moving from unconscious, unaware living to conscious, aware living. Instead of being corks on the sea of life, we exercise our power and ability to be the captain of our "ship."
2. **Joint Endeavor:** As you may know, the practice of health care in America is changing in many different ways. Many health care providers are changing from assuming an omniscient stance to one of working with the patient where both participate as equal partners. This is particularly true in mental health where the central task is to facilitate the patient's becoming more free to be in charge of what they think, feel, say, and do. In summary, your job is to work at your therapy; my job is discussed below.
3. **The Psychotherapist's Roles:** My responsibility to you consists of four roles. The first is to assess or diagnose your mental condition so that an optimum treatment regimen or protocol/plan is formulated and followed. This may involve referral to another doctor for medication or a specialized treatment. The second role is to provide emotional support and safety as needed. The third is to confront unhealthy behavioral patterns. The fourth is to lead you to new awareness, insights, behaviors, et cetera.

4. **The Final Session:** Psychotherapy involves the creation of a close, caring, yet professional relationship between the therapist and patient. Generally, therapy does not work without the development of a trusting, professional relationship. Without the rewards of the therapeutic relationship, doctors/therapists soon “burn out” and patients end their therapy prematurely. My request is that we agree to schedule one final session in advance for the purpose of reviewing our work together; to identify what worked well and what did not work well; and to articulate what needs to be done to stay on a healthy course.
5. **Payment Plan:** Payment for each session is due at the end of each session. Please write your check in advance so valuable session time is not used.
6. **24 Hour Cancellation Notice:** I require 24 hour notice if you need to cancel an appointment. I frequently have a waiting list of patients and your failure to keep an appointment creates a loss of valuable therapy time. If or when you fail an appointment or find it necessary to reschedule with less than 24 hour advance notice, I will bill you for the entire fee for the therapy hour, not just your insurance co-payment.
7. **Be On Time:** I agree to start and end our sessions on time. Please agree to arrive and leave on time.
8. **Telephone Calls:** Feel free to call me at 301-989-9155 whenever you need to speak with me.
9. **Credo:** Please read my beliefs about relationships as contained in the Credo on the waiting room wall.

I, _____ understand and agree to comply with the
(print name) Therapy Agreements stated above.

Date: _____ Signature: _____