

Tampa Bay Hypno-Therapy, LLC / Tamera L. Fontenot, LMHC, NCC, CCHt
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INFORMED CONSENT

Tamera L. Fontenot is a Licensed Mental Health Counselor in the State of Florida (MH-00005372) operating a private counseling and coaching practice (Tampa Bay Hypno-Therapy, LLC) in Pinellas County, Florida. She offers in-home, office, telephonic or electronic counseling and coaching sessions and supervises other qualified staff who practice in her offices. She is committed to operating in accordance with all of the best practices of her profession, and within all of the laws of the State of Florida.

Tamera L. Fontenot does NOT hold herself out as a physician or a psychiatrist; she cannot prescribe medications. She can and will however make referrals to such providers if they are appropriate or requested. She is also obligated to refer persons she deems to be in need of more intensive or different services, to such services. She does not initiate involuntary treatment commitments but may utilize emergency community services if such services are deemed necessary.

Tamera L. Fontenot's approach to working with people is primarily strength based, verbal, and has a problem solving orientation. There is no guarantee of any results made, as such results depend heavily upon the person and their willingness to participate in sessions. That having been said, helping people achieve their goals is the primary purpose of the counseling or coaching relationship and satisfied people are the foundation of a successful practice.

Communication with Tamera L. Fontenot is confidential but it is not "privileged". This means that she could be court ordered, in certain circumstances, to disclose information from sessions conducted with a client. Please see our Privacy Practices for details. She is a mandatory reporter of abuse and neglect in the State of Florida; which means that if she learns of abuse and /or neglect of a minor, disabled person or an elder, she is mandated to report it to the state's abuse registry. Further, it is noted that if a person discloses an intent toward suicide or toward harm of another person/property, she is mandated to contact the proper authorities to prevent such actions.

I have read this Informed Consent Document, understand what has been presented in it regarding Ms. Fontenot's approach to counseling, the limits of what Ms. Fontenot can and can not do, and that our communications, while confidential are not "privileged". I understand that if I have concerns about Ms. Fontenot's skills or professional behavior, I can contact the Florida Department of Health, the Division of Medical Quality Assurance (<http://www.doh.state.fl.us/mqa/index.html>).

Ms. Fontenot and I have further discussed : _____

Given all of this information, I do voluntarily enter into a professional counseling relationship with Tamera L. Fontenot, LMHC, NCC, CCHt. I have received a copy of this document.

_____ (Signature) _____ (Date)