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Welcome to my practice!

The following is provided to help you become acquainted with the way I work. Please take time to read it carefully. I will gladly discuss any of these items with you.

- ☒ Effective psychotherapy requires a good match between client and therapist. During our first session or two we will determine if I'm a good choice of therapist for you. If not, I will refer you to a therapist I believe can serve you better than I.
- ☒ Because I divide my time between private practice and teaching workshops out of town, I'm not always available for crisis management. Clients who have frequent crises, or who need a lot of between-session therapist support, will be referred to therapists who are more available for that level of care.
- ☒ I assume you wish to begin therapy because you desire certain changes in your life. I will do my best to help you achieve your goals, but I cannot guarantee any particular result. You are likely to gain the most benefit from counseling if you are committed to the process and attend regularly.
- ☒ Since biological factors can contribute to unwanted psychological distress, I may ask you about your health and diet. In some cases medical assessment and intervention is helpful and/or necessary.
- ☒ From time to time I may ask you to fill out various questionnaires. Please fill these out as best you can, it helps me learn important details about you without taking up extra session time.

Session Fees

- ☒ Payment for therapy will be due at the end of each session.
- ☒ I do not have a secretary to collect your fees, so please come prepared to pay with check or cash at the end of our session. It helps if you can write your check in advance. Thanks!

Additional Fees

- ☒ **Short-Notice Cancellation Fee:** Appointment cancellations made less than 48 hours before the scheduled appointment will be subject to the session charge.
- ☒ If a check of yours is returned by the bank for insufficient funds, you will be responsible for reimbursing any bank fees charged to my account for your returned check.

Scheduling

- ☒ I will make every effort to schedule your appointments at times that are convenient for you.
- ☒ Clients typically schedule 50-minute, 80-minute, or 105-minutes sessions – one per week. Longer sessions that are scheduled close together tend to result in the most efficient outcome.
- ☒ I do not have a secretary to schedule my appointments. If possible, please come prepared to schedule your next appointment at the end of each session.

Confidentiality

Except for certain situations, matters shared in counseling sessions will not be disclosed to anyone without your written permission. There are some exceptions to this:

- ☒ Therapists are legally required to report suspected abuse, neglect, or exploitation of a child, an elderly person, or a disabled person to the appropriate agency.
- ☒ Therapists have a legal and ethical obligation to warn appropriate authorities, family members, etc., when a client is seriously considering harming him/herself or others.
- ☒ Client case notes and records may be subject to subpoena when a client is involved in civil or criminal legal proceedings.

Consent for Therapy

I, _____, give permission to Dr John Drimmer, PsyD, (License PSY228866), to provide psychological treatment, counseling and assessment. I understand that services will be rendered in a professional manner, consistent with accepted ethical standards. By my signature I am affirming that the contents of this document have been satisfactorily explained to me.

Signature: _____ Date: _____