



TREATMENT RULES AND EXPECTATIONS

1. All intake forms are to be completed by the patient (or parent/guardian/ legal representative of the patient) before the Initial Appointment. It is the patient’s responsibility to give accurate and complete information to aid the Provider in the assessment of needs.
2. The treatment plan for every patient assumes regular attendance at all sessions.
3. Two consecutive absences from scheduled appointments will be deemed as non-compliant and may result in termination from treatment.
4. Punctuality is expected for all appointments.
5. Patients that fail to show for an appointment or cancel with less than twenty-four hours’ notice will be charged a \$100.00 fee that cannot be billed to insurance.
6. All patients have rights. We will maintain confidentiality and follow HIPAA Laws and CFR-42 Regulations. However, our Providers also have *duty-to-warn* legal obligations and may break confidentiality should any patient be a threat to him/herself or to someone else.
7. Any ongoing abuse of alcohol or drugs will greatly diminish the effectiveness of your treatment and is strongly discouraged. It may result in termination from treatment.
8. Any use, exchanging, supplying, receiving, or selling of controlled substances or alcohol at CMU Health Behavioral Medicine is forbidden and will result in termination from treatment.
9. No guns, knives, or other weapons are allowed on the premises of CMU Health Behavioral Medicine.

Patient Signature

Date

Parent/Guardian/Legal Representative Signature

Date

Witness Signature

Date