



KENNETH ETEFIA, MD

Payment and Billing

All fees are due at the time of service and are payable solely by credit card. Fees may be paid in the office or online via the website prior to the scheduled session. Upon request a charge form will be provided for submission to insurance companies for reimbursement.

Cancellation and Missed Appointment Policy

If an appointment is missed or canceled with less than 24 business hours, you will be billed according to the scheduled fee.

Sessions

A legal guardian must bring all non-emancipated minors to scheduled appointments and be available for consultation in person throughout the session. The initial evaluation does not in any way commit Dr. Etefia to providing the patient with care on a continuing basis.

Limits of Confidentiality

All information between Kenneth Etefia, M.D. and the patient is held strictly confidential. There are legal exceptions to this:

1. The patient authorizes a release of information with a signature.
2. The patient's mental condition becomes an issue in a lawsuit.
3. The patient presents as a physical danger to self (Johnson v County of Los Angeles, 1983).
4. The patient presents as a danger to others (Tarasoff v. Regents of University of California, 1967).
5. Child or Elder abuse and/or neglect is suspected (Welfare & Institution and/or Penal Codes).

In the latter two cases, the practitioner is required by law to inform potential victims and legal authorities so that protective measures can be taken. All written and spoken material from any and all sessions is confidential unless written permission is given to release all or part of the information to a specified person, persons, or agency.



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Release of Information

I authorize release of information to Primary Care Physicians, other health care providers, institutions, and referral sources for the purpose of diagnosis, treatment, consultation and professional communication. If I am an insured client, I further authorize the release of information including diagnosis for pharmacy prior certification, claims, certification, case management, quality improvement, benefit administration and other purposes related to my health plan.

Medication Policy

Prescription refill requests must be received with at least 24 hours advanced notice to insure that refill orders are sent to pharmacies and hard copy prescriptions are available early enough to avoid gaps in medication coverage. In some cases controlled substance prescriptions may be mailed to the patient's home by registered mail. If controlled substance prescriptions are lost then new prescriptions may not be obtained for 1 month from the date of the original prescription. If controlled substance prescriptions are lost on two occasions then Dr. Etefia will terminate care and refer the client to an alternate provider.

Emergency Access

Kenneth Etefia, M.D. or an alternate licensed clinician is available to handle emergencies by contacting the office line at 415-361-8065. As Dr. Etefia may not be available to return calls immediately, contacting 911 or the Marin County Crisis Line at 415-499-1100 should be the first options utilized when an urgent response is needed. Urgent matters include new onset suicidal thinking, self harm behavior, homicidal thinking, violent behavior and certain adverse medication reactions that will be specified by Dr. Etefia prior to prescription. Calls extending beyond 5 minutes will be billed at the same per minute rate as in-office visits.

Consent for Treatment

I authorize and request Kenneth Etefia, M.D. to carry out psychiatric exams, treatment and/or diagnostic procedures that now, or during the course of my treatment, become advisable. (cont.)



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I understand that the purpose of these procedures will be explained to me upon my request and that they are subject to my agreement. I also understand that that while the course of my treatment is designed to be helpful, Kenneth Etefia, M.D. can make no guarantees about the outcome of my treatment. Further, the evaluation and treatment process may bring up uncomfortable feelings and reactions such as anxiety, sadness, and anger.

Patient/Guardian Signature Date
