

Angela Skurtu, M.Ed., LMFT, AASECT Certified
1933 Lone Trail Lane
Chesterfield, MO 63017
314-973-7997
www.TherapistinStLouis.com

ST. LOUIS MARRIAGE THERAPY, LLC
Intake Paperwork

Please list the names of all parties in therapy below.

1) Name: _____ Date of Birth: _____

Employer/School Name: _____ Social Sec: _____

2) Name: _____ Date of Birth: _____

Employer/School Name: _____ Social Sec: _____

Relationship Status (married, life partners, single):

Address, City, State, and Zip: _____

Phone: (_____) _____ Alt.(_____) _____

Email(s): _____

Do you prefer sessions in person or via zoom: _____

Primary Care Physician: _____ Phone Number: _____

How did you hear about my practice? _____

Emergency Contact Name and Phone: _____

What problems would you like to cover in therapy? Please include 2-3 goals:

Have you ever been in therapy previously? If so, what was help or not helpful?

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Client #1) Name _____ Are you experiencing any of the following:

1) Death of a loved one? Yes No

2) Medical illness, mental illness, or disability? Yes No

What illness? _____

Medications currently taking: _____

3) Problems with drug use? Yes No

4) Problems with alcohol use? Yes No

5) Problems communicating with your partner? Yes No

6) Problems with sex and/or intimacy? Yes No

7) Problems with chores, division of household tasks, and/or division of childcare duties?

Yes No

8) Feeling unheard or not understood by your partner? Yes No

9) Feeling restless or bored with your life? Yes No

10) Any recent life changes such as job loss, moving across country, contracting an illness or disability, or any other big change? Yes No

11) Have you been the victim of emotional abuse, physical abuse, neglect, or sexual abuse? Yes No

10) Has anyone in your family been the victim of emotional abuse, physical abuse, neglect, or sexual abuse? Yes No

11) Are you coming to therapy to address an infidelity? Yes No

12) If you have children, can you list their names and ages?

13) Do you have any other concerns you would like to address?

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Client #2) Name _____ Are you experiencing any of the following:

1) Death of a loved one? Yes No

2) Medical illness, mental illness, or disability? Yes No

What illness? _____

Medications currently taking: _____

3) Problems with drug use? Yes No

4) Problems with alcohol use? Yes No

5) Problems communicating with your partner? Yes No

6) Problems with sex and/or intimacy? Yes No

7) Problems with chores, division of household tasks, and/or division of childcare duties?

Yes No

8) Feeling unheard or not understood by your partner? Yes No

9) Feeling restless or bored with your life? Yes No

10) Any recent life changes such as job loss, moving across country, contracting an illness or disability, or any other big change? Yes No

11) Have you been the victim of emotional abuse, physical abuse, neglect, or sexual abuse? Yes No

10) Has anyone in your family been the victim of emotional abuse, physical abuse, neglect, or sexual abuse? Yes No

11) Are you coming to therapy to address an infidelity? Yes No

12) If you have children, can you list their names and ages?

13) Do you have any other concerns you would like to address?

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Therapy Payment Policies:

- 1) Traditional sessions cost \$250 for 60 minutes and \$375 for 90 minutes. Typically, couples attend 3 assessment sessions before the therapist writes their treatment plan.
- 2) After completing the assessment, clients can choose from a variety of package options. Clients will be charged the agreed upon counseling package rate on the first day of the month. Your therapist will offer a suggested number of sessions for treatment as a part of your package. You and your therapist will discuss this and decide on treatment length as a team as a part of the treatment planning process.
- 3) To reschedule, please call or email 72 hours before your scheduled appointment. You will be charged the full session fee if you do not give at least 72 hours' or more notice to cancel.
- 4) To terminate therapy services before the agreed upon treatment plan, please submit a 30-day cancellation notice via email at angelaskurtu@gmail.com.
- 5) To schedule a Jump-Start Session, a \$1000 non-refundable deposit is required. Your card will be charged the final \$1000 three days (72 hours) prior to your scheduled appointment. You must cancel your session before that day to avoid penalty.
- 6) To schedule a Couples Therapy Retreat, a \$3000 non-refundable deposit is required. The final \$3000 will be charged one week prior to your scheduled session. You must cancel your retreat prior to that day to avoid penalty.
- 7) Clients can request an itemized bill for their therapy sessions. The client is responsible for submitting any claims to their insurance, HSA accounts, or Flexible Spending Accounts.

I have read and understand the Therapy Payment Policies. I agree to abide by this agreement and will resolve any questions with my therapist Angela Skurtu M.Ed., LMFT 2011031894.

Signed

Date

Signed

Date

Therapist Signature

Date

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CREDIT CARD AUTHORIZATION FORM

This form authorizes Angela Skurtu, M.Ed., LMFT #2011031894 at St. Louis Marriage Therapy, LLC, to keep my card information on file and to charge for therapy service fees.

Therapy services include individual counseling, phone therapy sessions, zoom therapy sessions, reading client emails (scheduling/rescheduling emails are free of charge), and any couples counseling services. Clients must give the therapist 72 hours or more notice to cancel a session and avoid paying the session fee. Therapy services are charged at the rate of \$250 per 60 minutes.

I understand and agree to these terms. I understand the conditions of this payment policy and agree to the conditions stated above:

Cardholder Name (Print): _____

Phone Number: _____

Email Address: _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Zip Code: _____

Signature: _____ Date: _____

INFORMED CONSENT

I have reviewed this consent form. My therapist has answered all of my questions about treatment satisfactorily. If I have further questions, I understand that my therapist will answer them or find answers for me if I have further questions. I understand that I may leave therapy at any time, although I understand that this is best accomplished in consultation with my therapist. I hereby give Angela Skurtu, M.Ed., LMFT, consent to treat me in therapy.

Signed: _____ Date: _____

Signed: _____ Date: _____

Therapist Signature: _____ Date: _____

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Orientation to Therapy: Therapy is a collaborative working relationship between the clients and the therapist. In the beginning of therapy, your therapist will assess your problems/concerns and create a formal treatment plan which outlines specific goals and tasks to work through as a part of therapy. Each couple is given an individualized treatment plan. Types of therapeutic tasks on the treatment plan may include skill building, reading material, conflict resolution skills, sexual health education, and homework assignments.

At regular intervals, your therapist will check in with you on progress towards these goals to decide how best to serve your needs. It is important to understand that at times, client problems get more difficult before things start to improve. Please be honest about challenges you may experience during therapy so that you and your therapist can work through those issues together.

Therapy starts with a comprehensive individual and/or couples' assessment. This takes place during the first 2-3 sessions. Following the assessment phase, each therapy session tends to include: 1) A check-in at the beginning of sessions; 2) An in depth discussion of either a topic the client suggests or a skill on the treatment plan; 3) Motivational interviewing designed to help you take action on your goals; 4) A suggested homework assignment for the individual or couple to complete between sessions.

At any time, you can ask your therapist to change her approach. If an intervention or suggestion doesn't feel helpful, bring it up with your therapist. If you think of something important after your session, you can email your therapist after session and state your concerns. Ultimately, therapy is a service to you that is controlled by you.

Therapy ends when both the client and therapist are mutually satisfied with the end result of therapy and clients have met their goals. Therapy can last anywhere from 10 to 30 sessions. The length of therapy is mutually determined by the therapist and the client based on the goals and needs of the client.

For various reasons, therapy may not be a good fit for some clients. If your therapist believes that you would benefit from therapy or treatment in a different setting, you will be informed as soon as possible and given referrals for treatment elsewhere.

Formal Education and Training: Angela Skurtu is a Licensed Marriage and Family Therapist #2011031894 in the State of Missouri and an AASECT Certified Sex Therapist. In addition, she holds a M.Ed. in Counseling, Family and Human Services from the University of Oregon and a BA in Psychology from the University of Hawaii. Angela is also an AAMFT Approved Supervisor and trains clinicians who are working towards licensure.

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Confidentiality and Limits: All information disclosed in sessions is confidential and is not revealed to anyone without your written consent (requiring a release of information). The only exceptions to this rule are required by Federal and Missouri laws and include:

- 1) By legitimate order of the court.
- 2) In the event of a medical emergency.
- 3) Suspected or reported child abuse or neglect or elder abuse or neglect. I am legally mandated to report any such information to the Division of Social Services, Children's Division.
- 4) In the event that there is a severe threat to self or others.
- 5) The minimal information necessary for billing purposes.

Confidentiality and Relational Therapy: It is common for your therapist to ask to meet with each person individually during couple's therapy. Information discussed in individual meetings is kept confidential. However, if something is disclosed in an individual appointment that would be helpful to address in the couple's session, your therapist will:

- 1) Inform you.
- 2) Discuss with you the information and its importance.
- 3) When appropriate, encourage you to discuss this information openly.
- 4) Not knowingly surprise you by intentionally disclosing this information without prior notice.

Fees: St. Louis Marriage Therapy, LLC is a private pay only establishment. Two types of Couples Intensives are available: The Couples Therapy Retreat and The Jump-Start Session.

The cost for the Couples Therapy Retreat is \$6000. This includes 5 days of therapy from 9-12pm, Monday through Friday. Following each session, couples will receive assignments to work on each day. Clients must pay a \$3000 non-refundable deposit to schedule the session. The final deposit of \$3000 is charged to your card on file one week prior to the start of the first session. Clients may cancel their retreat up to 7 days prior to their scheduled retreat without penalty. Clients who cancel their retreat within the 7 days will be subject to pay the remainder of the balance.

The cost for a Jump Start session is \$2000. This is a one-day session and includes an assessment from 9-12pm (3 hours), a lunch break, then extended counseling from 1-3pm (2 hours). Clients must pay a \$1000 non-refundable deposit to schedule the session. Clients may cancel their scheduled session up to 72 hours prior to their scheduled session without penalty. Clients who cancel their scheduled session within the 72-hour period will be subject to pay the remainder of the balance.

The fee for traditional therapy sessions is as follows: \$250 per 60-minute session and \$375 per 90-minute session. For traditional therapy, clients can schedule 3-4 appointments as a part of the assessment phase of therapy. This is to allow the therapist to

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understand the presenting problems and create a personalized treatment plan for the clients. This time frame is also permitted for the clients to decide if the therapist is a good fit for their needs.

Once the treatment plan is created, clients and therapist will review package options and commit to a therapy package. The therapist and clients will agree upon the number of sessions needed to complete the plan before committing to a package. After selecting a package, clients will be charged once monthly at the beginning of the month for the number of mutually agreed upon sessions.

If clients neglect to schedule and/or attend their pre-billed sessions for the month, the cost does not transfer into the next month. To terminate treatment before the agreed upon treatment plan, clients must submit a written notice of termination 30 days prior to ending therapy.

Cancellation Policy: To cancel an assessment session, please provide at least 72-hour notice to avoid the session fee. You can reschedule a therapy session via phone message at 314-973-7997 or email at angelaskurtu@gmail.com. Your therapist will make every effort to reschedule with you in a timely manner. If you wish to terminate your therapy package permanently, you must provide 30 days' notice to cancel your plan.

Phone Policy: Phone consultations can be requested by the clients. Phone consultations can be used for clients in crisis who would like therapeutic advice or problem-solving ideas. Phone consultations cost \$62.50 per 15-minute call and should only be used when a client is unable to schedule a traditional counseling session. Clients will NOT be charged for basic client questions such as scheduling/cancelling an appointment, informational questions about therapy, or for positive news/following up. Clients will also NOT be charged for the initial 10-minute phone consultation.

Email Policy: Scheduling/Rescheduling emails are free of charge. Clients who send emails for therapy advice will be charged at a rate of \$62.50 per 15-minute interval required to read through the email. Follow up emails to share positive news after therapy is terminated are also free of charge. (I love to hear when things are going well!)

Covid-19 Policy

Currently, St. Louis Marriage Therapy, LLC sees clients in person and via zoom. If you choose to come to sessions in person, your therapist will match whatever choice you make for masks during the session. If you choose to wear a mask in session, your therapist will do the same. If you choose to not wear a mask, your therapist will do the same.

It is our mutual responsibility (both the therapist and the client) to inform each other right away of the following: 1) Covid-19 exposure within the last 10 days of seeing each other in person; 2) Personally receiving a Covid-19 test that is positive within the last 10 days

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of seeing each other in person; 3) Either party is experiencing Covid-19 symptoms that could impact an in person session. Once informed, we will transition sessions to zoom for the duration of the CDC guidelines for quarantine.

The typical cancellation policy is still in place for Covid-19 situations. At any point, clients or the therapist can choose to do sessions via zoom as an alternative route to in person therapy.

Zoom Policy

For clients who choose to use zoom, you will receive your zoom link the morning of your session. Clients should pick a place in your home that has a good connection and is private. Moving around, driving, or doing chores is not the best approach to therapy and should be avoided where possible.

Location

Currently, Angela Skurtu is offering therapy at her private home residence. The address is 1933 Lone Trail Lane, Chesterfield, MO 63017. We request that clients park on the street and text your therapist when you arrive at 314-973-7997. Please, wait in the car until your therapist invites you into the home via text. This way, we respect the privacy of any clients in session.

If you have a disability that requires assistance, please let me know when you are scheduling your appointment. I will be happy to offer a closer parking space or any accommodations necessary.

Client Bill of Rights: As a client of a Missouri registered Licensed Marriage and Family Therapist, you have the following rights:

- To expect that a licensee has met the minimal qualifications of training and experience required by state law;
- To examine public records maintained by the State Committee of Marital and Family Therapists and to have the Committee confirm credentials of a licensee;
- To obtain a copy of the AAMFT Code of Ethics;
- To be informed of the cost of professional services before receiving the services;
- To be assured of privacy and confidentiality while receiving services as defined by rule and law (for limits see section on Confidentiality);
- To be free from being the object of discrimination on the basis of race, religion, gender, sexual orientation, or other unlawful category while receiving services.

Tips for a Great Couples Therapy Experience

- 1) **Schedule time to discuss therapy as a couple in between therapy sessions.** Most of therapeutic work takes place outside of the therapy room. Use this time to hold each other accountable and discuss progress you are making. Use this time to make goals for your next session. Use this time to practice the skills you are learning.
- 2) **Clarify and follow through with homework assignments.** Your therapist will assign you articles, videos, podcasts, books and/or behavioral activities to work through as a team. Make sure you ask questions about assignments and inform your therapist if you struggled to follow through. These are great opportunities to assess for motivation, therapeutic blocks, or relationship challenges.
- 3) **Talk to your partner and your therapist if you are struggling.** You have a choice in how you engage in therapy. Your therapist's job is to help you troubleshoot issues that come up, including issues with the therapist's approach. Please be open and honest and we will work together to find solutions.
- 4) **Come in regularly for the first 2-3 months.** You can choose to come in weekly or every other week. This helps establish momentum and accountability.
- 5) **Take notes or record your sessions.** We cover a lot of information, and it is easy to forget things discussed in therapy. Use whatever tool you need to remember and follow through with suggestions.
- 6) **Expect failures and setbacks. Be kind to yourself.** Habits take anywhere from 28 to 257 days to form and solidify. You will require some trial and error to make more permanent changes.
- 7) **Stay in therapy beyond the crisis period.** Most clients only stay in therapy for the 1st three months-just long enough for the major crisis to settle down. Much of therapy during this time focuses on helping couples manage emotions. After the crisis period is when the deeper therapeutic work occurs.