

INFORMED CONSENT FOR FORENSIC PSYCHOLOGICAL ASSESSMENT

**Carla Bradshaw, Ph.D.
Clinical Psychologist, WA # 1223
1104 Market Street
Kirkland, WA 98033
425-827-7111
435-889-8362 (fax)**

This statement is a disclosure of certain information regarding the process of psychological assessment. It details certain rights and responsibilities that you have in this process and gives you some information about me.

My Training and Licensure

I have a PhD. in Clinical Psychology, which I earned in 1987 from the University of Washington, in Seattle. I am licensed as a psychologist (#1223) in Washington State. My expertise is in the assessment of the psychological consequences of trauma, victimization, discrimination, and harassment.

Approach to Assessment

The assessment process is designed to answer questions about the possible causes of problems you may be currently experiencing. The process usually has two parts: structured interviews which can take up to 8 hours, and the administration of psychological testing, which normally takes from an hour and a half to two hours. These are estimates of the time it may take to complete the process and may vary, either longer or shorter in duration, depending on how much information you have to share and the complexity of the issues being assessed.

Usually I am conducting this assessment because you are a party in a legal matter. If that is the case, I will be consulting with the attorney who referred you to me regarding my findings. Your consent to this evaluation includes consent to release information to that attorney and/or their agents (e.g. their paralegal). If I am called upon to testify in a deposition or courtroom proceedings, the findings of this evaluation can be subpoenaed for examination by the opposing attorney, and it is very likely that this will happen. When you raise the issue of your mental status in a legal case, you may have waived your right to confidentiality of these records. In addition, if I am deposed by the opposing attorney, I will be required to respond to questions regarding my evaluation of you and my findings. I will take all possible steps to protect your privacy in those contexts where I am not required to render opinions or share information. It is important that you be as candid as possible with me in the assessment process. Information that is concealed from me is potentially far more damaging than if it is revealed here and integrated into the complete findings of my evaluation.

I may be asked to write a report of my findings. If so, you will receive a copy of the draft of that report. If you find that what I say misrepresents you or is offensive to you in some way, you may request that I make changes so as to accurately reflect your perception. However, I retain the right to include those of my professional opinions that I believe to represent my findings most accurately in your case. You are not obligated to use any report that I write. You will receive a final copy of my report.

I may tape record our interview; this is standard practice in a forensic evaluation and preserves an absolutely accurate record of what you say. You have the right to request that I turn off the tape recorder at any time. However, I cannot be responsible for the complete accuracy of my reporting of any information that you give me when that tape recorder is not running.

Fees

My fee for any work that I do of a non-testimonial nature (e.g. assessment interviews, test scoring, reading records, talking with the attorney, report writing) is \$250/ hour. My fee for any kind of testimonial work, including the time I spend traveling or **waiting to testify, is \$300**. Fees are payable in full at the end of the

month in which they occur. Late bills incur a charge of 1.5% per month on any unpaid balance. I will bill directly to the attorney who has referred you to me.

Complaints

If you have e reason to believe that I have acted in an unethical or unprofessional manner, I encourage you to discuss this with. If you do not feel that I have been responsive to your complaints, there are several formal routes by which you can bring a complaint against me. These include: the Examining Board for Psychology, Dept. of Health, Olympia, WA 98504; the Ethics committee of the Washington State Psychological Association, 711 N 35th Street, Suite 206, Seattle, WA 98103 (206) 547-4220; or the Ethics Committee of the American Psychological Association, 1200-17 NW, Washington DC, 20036.

Client Consent to Assessment

Have read the above disclosure statement and understand its terms. I have discussed any questions I have with Dr. Bradshaw and she has answered them to my satisfaction. I agree to participate in the assessment process as described above. I agree to the release of information to the attorney who has referred. I agree to the fee quoted above. I am over the age of eighteen and competent to enter into this agreement.

Signed: _____

Address: _____

Telephone: _____ Date: _____

Witness: _____