# VERONIQUE MEAD, MD, MA, SEP, PPNP*
## *CHRONIC ILLNESS TRAUMA STUDIES*

***How Adverse Experiences Shape Health & Why It's Not Psychological***
C: (720) 453-7945 veronique@chronicillnesstraumastudies.com


**AGREEMENT FOR CONSULTATION**

I wish to receive consultation from Veronique Mead, MD, MA, SEP, PPNP*, President of Chronic Illness Trauma Studies.

I understand that these consultations do not constitute clinical supervision and that I remain completely responsible – ethically and legally – for the decisions I make in my own clinical case situations. My consultant will provide me with an opportunity to discuss clinical cases and issues about which she may have some expertise, and she may help me consider options for responding, but the comments made for my consideration are not supervisional mandates.

I also understand that although we may sometimes need to discuss personal issues that may be relevant to my clinical work, these consultation services do not constitute psychotherapy.

I understand the potential limits of the confidentiality of this relationship. To the extent possible, my case presentations will provide no identifiable patient information. However, I understand that if I provide identifiable information about a situation regarding which my consultant has an ethical or legal obligation to report confidential information, she will inform me at the time and will give me the opportunity to make the report myself.

I understand that if my consultant becomes aware that she knows or has a prior relationship with the presented client(s), or if she believes she has a potential conflict of interest in her relationship with me, she will notify me of that fact immediately and will cooperate in helping me find a different consultant.

* SEP: Somatic Experiencing Practitioner; PPNP: Pre and Perinatal Professional


This Consultation-Consultee contract form was downloaded 2/16/22 as an APA approved form by the Center for Ethical Practice, Charlottesville, Virginia and adapted as recommended