



## CA PSYCHOLOGY

**ALOHA,**

Thank you for choosing CA, Psychology, LLC!

In order to provide you with the most efficient and effective care, please download a copy of our new patient packet from our website [www.ca-psychology.com](http://www.ca-psychology.com), available in the Downloads folder. Please review and complete the following forms at your leisure prior to your appointment:

1. **Demographic Form.** This form allows me to obtain important contact and payment information.
2. **Client Service Agreement & Informed Consent.** This form describes our therapy, services, confidentiality, limits of confidentiality, billing, and fees and gives consent to treatment. (Please note if you are divorced and share joint custody of your child both parents will need to sign this form).
3. **Informed Consent for Online Psychotherapy Services.** This form outlines the risk and benefits associated with tele-psychotherapy.
4. **Privacy Policy.** This form describes patient privacy.
5. **Social Media Policy.** This form provides guidelines regarding client-therapist contact outside of the session.
6. **Child/Adolescent/Adult Intake Questionnaire.** This form helps me to obtain an accurate history and get a thorough understanding of presenting concerns.

Please submit the forms listed above, as well as your ID, prior to or during your first appointment. Session fees are due at the time of service and are payable in the form of credit card payment. Please do not hesitate to contact me via phone at (808) 566-5636 or via email at [mail@ca-psychology.com](mailto:mail@ca-psychology.com) if you have any questions or concerns. I will be happy to assist you.

Mahalo,

Dr. Catherine Gallahue  
*Chief Clinical Psychologist*