

# Kim Roser-Kedward, LCSW

Licensed Clinical Social Worker–LCS 22405

Get well. Be well. **Stay well.**

## **Welcome to my private practice.**

I look forward to working with you to help improve your quality of life.

**Attached are important forms and policies related to the services that I provide.** Thank you for your patience in completing these forms.

I am required by law and the ethics of my profession to inform you of these policies which are based on the standard of care for professional, clinical social work services. *Most of these forms must be completed prior to your first appointment.*

### **Forms and Policies Checklist:**

- Patient Registration Information
- Treatment Information and Consent Form
- Fee Policy, Schedule and Agreement
  
- Notice of Privacy Practices
- Acknowledgement of Receipt of Privacy Practices
- Authorization for Release of Information (if applicable)
  

<input type="checkbox"/> Adult Information Form	<input type="checkbox"/> Insomnia Severity Index
<input type="checkbox"/> AUDIT-C	<input type="checkbox"/> PHQ-9
<input type="checkbox"/> GAD-7	<input type="checkbox"/> PCL-5

### **I also need you to bring your:**

- Health Insurance Card (if applicable), and
- A government issued photo ID

Thank you,

Kim

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