

## **Professional Disclosure Statement**

**Brittany Corradetti, MA, LPCA, NCC**

MA Clinical Mental Health Counseling, BA Psychology

The Center for Counseling & Wellness

110 Ye Olde Kings Highway, North Myrtle Beach, SC 29588

Phone: 843-663-0772; Fax: 843-663-0772

### **Formal Professional Education and Certifications:**

- Master of Arts Licensed Clinical Mental Health Counselor from Southern New Hampshire University, 2026
- Bachelor of Arts in Psychology from Westminster College, 2012
- Member of American Counseling Association, 2023
- Member of South Carolina Counseling Association, 2023
- Member of National Society of Leadership and Success, 2024

**Qualifications:** Brittany Corradetti is a Licensed Professional Counselor Associate that graduated from Southern New Hampshire University, with a Master of Arts degree in Clinical Mental Health Counseling and is qualified to provide professional counseling services under the supervision of Chance Malkasian, MA, LPC, LPCS Candidate and Illyana Annunziato, MA, LPCS, LPC, LAC, LCMHC. Brittany is a National Certified Counselor (NCC) that works with individuals, couples, and groups to help them cope with anxiety, depression, marital/relationship issues, life transitions, mood disorders, grief/loss, trauma, and other mental, emotional, and spiritual issues. She counsels clients of all ages through The Center for Counseling & Wellness.

**Fee Schedule:** Sliding Fee Scale (\$110-\$190).

**Cancellation Policy:** Please note that a \$100.00 fee will be charged for each occurrence if appointments are not canceled with at least 24-hour notice.

**Confidentiality:** Conversations and concerns that are discussed during our session will legally and ethically be held confidential. However, there are circumstances in which cannot legally or ethically be kept confidential, such as:

- If you disclose or it is reasonably suspected that you will pose an imminent danger to the health and safety of yourself and/or others.
- If at any time you disclose that a child, disabled person, or elder adult has been or will be abused and/or neglected.
- If a court order requires the release of case records or direct testimony.

- If you request that your records be released and sign a release of information form.
- If you are a minor, your confidentiality is constrained by the request of your parent and/or legal guardian.

**EXPLANATION OF DUAL RELATIONSHIPS:** Although our sessions may be intimate emotionally and psychologically, it is important to remember that our relationship is a professional one rather than a social one. Therefore, our contact is limited to your sessions. If we happen to encounter one another outside of our sessions, I will not approach you in order to ensure confidentiality. I also will not be able to follow you or allow you to follow me on any social media platforms.

**CELL PHONE POLICY:** The clinician may provide her cell phone number for emergencies, only. By signing this document, the client understands that the clinician’s personal cell phone is not a HIPPA compliant device, and the client waives his/her rights to confidentiality if the client contacts the clinician on this platform.

*If you have any questions regarding these limitations listed, please feel free to ask at any time.*

This document is mandated by South Carolina State law and Public Law 104-191 for your protection. Rights and procedures to file a complaint: If you feel you have been treated in an unethical manner by Brittany Corradetti, LPCA, under the supervision of Chance Malkasian, MA, LPC, LPCS Candidate and Illyana Annunziato, MA, LPCS, LPC, LAC, LCMHC, while a client at The Center for Counseling & Wellness, it is your right to file a complaint with the Board of Examiners or by calling them and requesting the appropriate forms and guidance. The following contact information that you may need: SC Department of Labor, Licensing, and Regulation, Board of Examiners for Licensure of Professional Counselors and Marital and Family Therapist; 3600 Forest Drive, Suite 101, Post Office Box I I329, Columbia, SC 2921 1-1 139; Telephone 803-896-4658, Fax 803-734-4284.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This information is required by the state of South Carolina Department of Labor, Licensing, and Regulation Board of Examiners for Counselors, Therapists, and Psycho-Educational Specialists which regulates all licensed and registered counselors and social workers.

Your signature on the intake signature disclosure page indicates that you have read, understood, and a copy of this document has been made available to you at your request.