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Integral Wellness
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About me

Welcome to the practice! I am excited to be practicing here in after my training. After medical school at the University of New England, I completed my four year adult psychiatry residency at the Harvard Cambridge Health Alliance Residency Training Program in Cambridge, Massachusetts, followed by a fellowship Women's Mental Health at the Massachusetts General Hospital Center for Women's Mental Health in Boston, Massachusetts. I have had diverse training in medication management and various psychotherapies including psychodynamic therapy, Cognitive Behavioral Therapy (CBT), and mindfulness based therapies. I am board certified in Adult Psychiatry.

I begin all new patient evaluations with an initial comprehensive evaluation consisting of two separate visits. I believe it is important to have a thorough review of the person's history including a full medical, psychiatric and social history before entering into care.

In my private practice I provide the following services: consultations to clarify diagnosis or to make recommendations to another treatment provider (i.e. a, ob/gyn or primary care doctor), individual therapy with or without medication management, and ongoing medication management (usually in conjunction with a trusted outside therapist). Additionally, I am happy to do consultations around integrative care.

Practice Policies

Communication:

Telephone communication

Routine contact is via telephone voice mail at (207) 536-8511. I check this voice mail periodically during normal business hours. I do not have texting capacity and do not respond to text messages.

Emergency communication

Please be advised that my practice is not oriented to emergency care. For true clinical emergencies please call 911 or your local emergency room. In the event of an urgent (non-emergent) matter, which can not wait until the next business day, current patients may reach me at (207) 536-8511.

E-mail communication

E-mail contact is via kesslerintegralwellness@gmail.com. Please be aware that e-mail should be used for administrative matters such as appointment rescheduling or prescription refills only and is not to be used for urgent or emergency matters. I generally check email at least once daily during the work week. Remember that email communications are not necessarily secure and therefore clinical information should not be shared via email.

Telecommunication

Please be advised that communication via video chat services like skype or facetime cannot be deemed confidential. All records that I keep in regards to those sessions will be kept confidential along with the rest of your records.

Cancellation Policy:

You are responsible for keeping all appointments or canceling them with two full business days notice, including initial evaluations. You will be charged the full cost of any appointments missed with the exception of true emergencies.

Practice Fees and policies:

Initial Evaluation (80 minutes).....\$ 400.00
Psychotherapy- with or without medication management (50 minutes).....\$ 230.00
Medication management with brief psychotherapy (30 minutes).....\$ 170.00

Please note that the fee for the initial consultation (required for all patients) includes a diagnostic evaluation and a preliminary treatment plan. I do ask for a \$200 deposit which goes towards that first visit, when the session is scheduled. If that slot is not cancelled within 48 business hours of the appointment I do ask for payment in full for that time. I do not ordinarily charge for periodic brief phone calls with outside agencies, or other collaterals as I consider this to be part of good care, but if such efforts are necessary on an extended and ongoing basis I will request a fee based on my hourly rates.

Payment and Billing:

Payment is expected at the beginning of any initial appointment and, thereafter, at the end of each appointment. I accept cash, check or credit card (plus a 3.5% processing fee). I do not accept insurance and bill patients/families directly. I will include the necessary information on your bill if you request one such that you can seek reimbursement for out of network benefits from your insurer. Insurance usually reimburses a percentage of the charge, but some insurances offer no out-of-network benefits. Please check with your insurer prior to the first appointment to clarify your benefits.

Medication Management and Refills:

Medication management is offered for current patients. I will not fill prescriptions before we have established treatment. I do not offer early prescription refills for controlled substances, even if a prescription is lost or stolen. I require 72 business hours for prescription refill, and ask that patients email with pharmacy name, date of birth and type and dose of the medication they need refilled.

If you have questions about these policies and procedures, please do not hesitate to ask.

Patient Name: _____

Address: _____

Date of Birth: _____

Contact phone number: _____

Primary care doctor: _____

Referring source:

Agreement:

Please sign that you have read and agree to the above policies and have received a copy for your records.

Patient signature: _____ Date: _____