

FULL-LENGTH PRACTICE TESTS

Practice Test 8 — 100 Questions - Comprehensive Coverage Across All Domains

1. A therapist receives a voicemail from a client's probation officer requesting verification that the client is attending therapy. The therapist should:

- A. Return the call and verify attendance
- B. Verify whether proper authorization exists before providing information
- C. Ignore the call as it violates confidentiality
- D. Provide detailed session notes to the probation officer

2. An LMFT learns that a client has been posting fake negative reviews about a business competitor online. The therapist should:

- A. Report to law enforcement
- B. Advise the client to remove the reviews
- C. Terminate therapy for dishonesty
- D. Address it clinically as a treatment issue

3. Under California law, which entity is responsible for licensing LMFTs?

- A. Board of Behavioral Sciences
- B. California Medical Board
- C. Department of Consumer Affairs directly

D. American Association for Marriage and Family Therapy

4. A therapist treating a child suspects the child may be experiencing abuse at the hands of a babysitter. The therapist should:

- A. Confirm abuse before reporting
- B. Interview the babysitter first
- C. File a mandated report based on reasonable suspicion
- D. Wait for physical evidence

5. A client reveals they are undocumented and fears the therapist might report them. The therapist should:

- A. Explain reporting requirements for undocumented status
- B. Reassure the client that immigration status is confidential
- C. Report to immigration authorities
- D. Refer to an immigration attorney before continuing

6. An AMFT's supervisor is going on medical leave for three months. The AMFT should:

- A. Continue seeing clients without supervision
- B. Reduce caseload until supervisor returns
- C. Stop seeing all clients
- D. Arrange for a qualified substitute supervisor

7. A client describes thoughts of harming a family member but states they would "never actually do it." The therapist should:

- A. Conduct a thorough risk assessment
- B. Immediately call police
- C. Hospitalize the client
- D. Document and take no further action

8. The requirement that LMFTs complete continuing education is primarily intended to:

- A. Generate revenue for CE providers
- B. Keep therapists busy
- C. Ensure ongoing competence and current knowledge
- D. Satisfy insurance company requirements

9. A therapist's client asks to switch from in-person to telehealth sessions. Before agreeing, the therapist should:

- A. Refuse all telehealth requests
- B. Assess appropriateness and address informed consent for telehealth
- C. Require a medical reason for the switch
- D. Charge higher fees for telehealth

10. A client who is a financial advisor describes investing client funds in risky ventures without disclosure. The therapist should:

- A. Report to the SEC immediately
- B. Advise the client to stop

- C. Terminate for unethical behavior
- D. Address it clinically while maintaining confidentiality

11. Under HIPAA, clients have the right to:

- A. Access their treatment records with limited exceptions
- B. Demand deletion of all records
- C. Prevent any insurance billing
- D. Prohibit all disclosures without exception

12. A therapist notices a client's spouse waiting in the lobby appears to have a black eye. The therapist should:

- A. Report to law enforcement immediately
- B. Confront the client about abuse
- C. Note the observation and explore domestic violence issues appropriately
- D. Call CPS

13. An LMFT receives a request from a former client's life insurance company for treatment records. The therapist should:

- A. Provide records since insurance companies have automatic access
- B. Verify authorization from the client or their representative before releasing
- C. Refuse all insurance company requests
- D. Provide only a summary without authorization

14. A client in couples therapy reveals they have hidden significant debt from their spouse. Under a policy where individual disclosures are confidential, the therapist should:

- A. Immediately tell the other spouse
- B. Terminate couples therapy
- C. Report to financial authorities
- D. Keep the information confidential per the established policy

15. A therapist realizes they made an error in a client's diagnosis that was submitted to insurance. The therapist should:

- A. Correct the error and notify appropriate parties
- B. Leave it since it's already submitted
- C. Change it only if the client asks
- D. Destroy the original documentation

16. A client mentions their therapist friend told them that therapy records can never be subpoenaed. The therapist should:

- A. Agree with this statement
- B. Ignore the misinformation
- C. Provide accurate information about subpoenas and privilege
- D. Refer the client to an attorney for legal advice

17. An LMFT treating a client with OCD learns the client has been performing compulsive rituals that are interfering with work. The therapist should:

- A. Report to the client's employer
- B. Address it as part of treatment planning
- C. Hospitalize the client
- D. Refer to a different specialist immediately

18. A therapist providing group therapy notices one member frequently dominates discussions. The therapist should:

- A. Remove the member from the group
- B. Ignore it to avoid confrontation
- C. Address it privately only
- D. Address the dynamic therapeutically in the group

19. Under California law, records for adult clients must be retained for a minimum of:

- A. Seven years after termination
- B. Five years after termination
- C. Ten years after termination
- D. Three years after termination

20. A client gives the therapist their self-published book as a gift. The therapist should:

- A. Refuse all gifts without exception
- B. Accept only if the book is under \$20
- C. Consider the gesture thoughtfully and respond appropriately

D. Sell the book online

21. A therapist discovers that a client's presenting problem is actually related to an undiagnosed medical condition. The therapist should:

A. Diagnose and treat the medical condition

B. Refer for medical evaluation while continuing appropriate support

C. Terminate therapy until medically cleared

D. Ignore the medical issues

22. A client who is a real estate agent offers the therapist a discount on buying a home. The therapist should:

A. Accept the discount as a kind gesture

B. Accept only if the discount is small

C. Report the offer to the BBS

D. Decline to avoid dual relationship complications

23. The concept of "standard of care" in malpractice refers to:

A. What a reasonably prudent professional would do in similar circumstances

B. The highest possible level of care

C. Whatever the BBS requires

D. What the client expects

24. A therapist receives a phone call from someone claiming to be a client's physician requesting information. The therapist should:

- A. Provide information immediately to assist medical care
- B. Refuse all phone requests
- C. Verify identity and authorization before disclosing
- D. Only provide information by fax

25. An LMFT treating an adolescent learns the teen is being bullied at school. The therapist should:

- A. Report to law enforcement
- B. Address it clinically and consider involving parents and school as appropriate
- C. Confront the bullies directly
- D. File a mandated report

26. A therapist learns that a client has been providing false information to receive government benefits. The therapist should:

- A. Report to the government agency
- B. Advise the client to stop
- C. Terminate for fraud
- D. Address it clinically while maintaining confidentiality

27. Which is TRUE about the therapist-patient privilege in California?

- A. The privilege belongs to the client, not the therapist
- B. The privilege belongs to the therapist
- C. Either party can waive privilege

D. Privilege automatically ends at termination

28. A client asks the therapist to provide documentation for an emotional support animal. The therapist should:

- A. Refuse all such requests
- B. Provide documentation without assessment
- C. Assess clinical justification and document appropriately if warranted
- D. Refer to a physician for all ESA letters

29. A therapist's client reveals plans to divorce their spouse but doesn't want the spouse to know yet. The therapist should:

- A. Contact the spouse to prepare them
- B. Maintain confidentiality and support the client through the process
- C. Refuse to discuss divorce
- D. Insist the client tell the spouse immediately

30. An LMFT receives a complaint from a former client's family member about treatment that ended two years ago. The therapist should:

- A. Contact the former client to discuss
- B. Destroy records to protect themselves
- C. Ignore complaints from non-clients
- D. Respond appropriately and consult with an attorney if needed

31. A therapist notices that their own religious beliefs conflict with a client's lifestyle choices. The therapist should:

- A. Manage personal reactions and provide objective professional care
- B. Share their religious views with the client
- C. Refer immediately
- D. Try to change the client's behavior

32. Under California law, a minor who is 12 or older may consent to treatment for:

- A. Any mental health issue without restriction
- B. Only substance abuse
- C. Mental health treatment if mature enough to participate intelligently
- D. Only with parental notification

33. A therapist receives a request from a client to access their complete treatment record. The therapist should:

- A. Refuse the request
- B. Provide access as required by law with limited exceptions
- C. Require a court order
- D. Provide only a summary

34. A client who was court-ordered to treatment completes the required sessions but shows no improvement. The therapist should:

- A. Report failure to the court immediately
- B. Extend treatment without court approval

- C. Lie about progress to protect the client
- D. Document accurately and report as required to the referral source

35. A therapist providing telehealth during a pandemic notices a client's living situation appears unsafe for children in the background. The therapist should:

- A. Assess the situation and file a report if child abuse or neglect is suspected
- B. Ignore what's seen in the background
- C. Immediately call police
- D. Terminate the telehealth session

36. An LMFT learns that a colleague has been dating a former client who terminated two months ago. The therapist should:

- A. Ignore it as the colleague's business
- B. Report to the BBS immediately
- C. Consider addressing the concern with the colleague given the two-year prohibition
- D. Contact the former client

37. A client mentions they are thinking of suing their previous therapist. The current therapist should:

- A. Discourage the lawsuit to protect the profession
- B. Maintain neutrality and explore the client's feelings and options
- C. Encourage the lawsuit
- D. Testify against the other therapist

38. The primary purpose of informed consent is to:

- A. Protect the therapist from lawsuits
- B. Satisfy insurance requirements
- C. Meet BBS regulations
- D. Ensure clients can make meaningful decisions about treatment

39. A therapist working with a veteran learns the client experiences nightmares and hypervigilance. The therapist should:

- A. Assess for PTSD and provide appropriate trauma-informed treatment
- B. Refer to the VA immediately
- C. Prescribe sleep medication
- D. Avoid discussing military experiences

40. A client asks the therapist to write a letter supporting their request for a private office at work. The therapist should:

- A. Write whatever the client requests
- B. Refuse to write any workplace letters
- C. Assess whether clinical justification exists and document appropriately
- D. Only write letters for diagnosed disabilities

41. A therapist's client discloses having an affair with a coworker. The therapist should:

- A. Contact the client's spouse
- B. Explore the affair as clinically relevant material
- C. Terminate for immoral behavior

D. Report to the client's employer

42. Under California's Tarasoff law, a therapist may discharge their duty to protect by:

- A. Documenting the threat in the chart
- B. Telling the client not to harm anyone
- C. Asking the client to promise safety
- D. Warning the victim, notifying police, or taking other reasonable steps

43. An LMFT providing therapy to a family learns that the parents use corporal punishment. The therapist should:

- A. Assess whether the punishment constitutes abuse and respond appropriately
- B. Report to CPS automatically
- C. Refuse to treat families who use corporal punishment
- D. Ignore parenting choices

44. A therapist receives a subpoena for records in a case where they have no client involvement. The therapist should:

- A. Comply with the subpoena immediately
- B. Ignore it since they have no relevant information
- C. Respond appropriately indicating they have no responsive records
- D. Destroy any records that might be remotely related

45. A client reveals they accessed the therapist's personal social media accounts and comments on details from the therapist's posts. The therapist should:

- A. Delete all social media accounts immediately
- B. Address the boundary issue and its implications
- C. Share more personal information to build rapport
- D. Report the client to law enforcement

46. The ethical principle of veracity requires therapists to:

- A. Verify client identities
- B. Check references before accepting clients
- C. Always obtain written consent
- D. Be truthful in professional communications

47. A therapist treating a client for anxiety discovers the client has significant hoarding behaviors. The therapist should:

- A. Incorporate hoarding into the treatment plan if competent or refer appropriately
- B. Report to the health department
- C. Ignore hoarding as not part of the presenting problem
- D. Contact the client's landlord

48. A client asks the therapist if they have ever experienced depression themselves. The therapist should:

- A. Always answer personal questions to build rapport
- B. Refuse to answer any personal questions
- C. Consider the clinical purpose and respond thoughtfully

D. Provide detailed personal history

49. An LMFT providing supervision learns that a supervisee has been consistently late to client sessions. The supervisor should:

A. Ignore occasional lateness

B. Address the pattern and its impact on clients and professionalism

C. Terminate supervision immediately

D. Report to the BBS

50. A client brings a emotional support animal to every session, but the animal is disruptive. The therapist should:

A. Allow continued disruption without comment

B. Report the client to animal control

C. Refuse to see the client

D. Address the issue and establish reasonable policies

51. Under HIPAA, the Notice of Privacy Practices must be provided:

A. At the start of treatment

B. Only upon request

C. After termination

D. Only to insurance companies

52. A therapist realizes they have been inadvertently using a technique that research now shows is potentially harmful. The therapist should:

- A. Continue using it since they have experience
- B. Ignore new research
- C. Discontinue the technique and seek appropriate alternatives
- D. Use it only with certain clients

53. A client's adult child calls to report that the client has been talking about suicide. The therapist should:

- A. Refuse to speak with family members
- B. Thank the caller and take appropriate clinical action without confirming the client relationship
- C. Confirm the client is in treatment
- D. Provide detailed treatment information to the concerned family member

54. A therapist learns that their own child is dating a current client's child. The therapist should:

- A. Terminate immediately without explanation
- B. Continue without acknowledging the connection
- C. Ignore it since the children are separate individuals
- D. Assess the conflict and take appropriate action including possible discussion with the client

55. An LMFT treating a client with bipolar disorder learns the client stopped taking lithium without telling their psychiatrist. The therapist should:

- A. Address this clinically and encourage communication with the psychiatrist
- B. Call the psychiatrist immediately

- C. Prescribe alternative medication
- D. Terminate until the client resumes medication

56. A client who is a therapist asks for treatment but wants to direct the therapy. The therapist should:

- A. Allow the client to control treatment
- B. Refuse to treat other therapists
- C. Maintain appropriate professional boundaries while incorporating client input
- D. Report the request to the BBS

57. Under California law, which situation creates an exception to confidentiality?

- A. Client's family requests information
- B. Reasonable suspicion of child abuse
- C. Client discusses embarrassing information
- D. Therapist believes disclosure would help

58. A therapist conducting a child custody evaluation should:

- A. Advocate for the parent who retained them
- B. Base conclusions on one parent's account
- C. Avoid evaluating the children
- D. Maintain objectivity and evaluate all relevant parties

59. A client mentions they have a gun in their car during session because they fear an ex-partner. The therapist should:

- A. Assess for safety concerns and address appropriately
- B. Report to law enforcement immediately
- C. Confiscate the weapon
- D. Terminate for bringing a weapon

60. An LMFT's client asks if the therapist can see their spouse individually as well. The therapist should:

- A. Agree immediately to help both
- B. Refuse all requests to see family members
- C. Discuss implications and potential conflicts before deciding
- D. See the spouse secretly

61. A therapist treating a client with chronic pain learns the client has been obtaining medications from multiple doctors. The therapist should:

- A. Report to law enforcement
- B. Address it clinically and assess for substance use issues
- C. Ignore medical management issues
- D. Contact all the doctors involved

62. The purpose of the BBS disciplinary process is primarily to:

- A. Punish therapists
- B. Generate revenue
- C. Protect colleague relationships

D. Protect the public from incompetent or unethical practitioners

63. A therapist receives a message that a client has been hospitalized after a suicide attempt. The therapist should:

A. Verify the information and coordinate care as appropriate with proper authorization

B. Visit the client in the hospital unannounced

C. Close the case immediately

D. Wait for the client to contact them after discharge

64. A client asks the therapist to hold a session at the client's workplace during lunch. The therapist should:

A. Agree to accommodate the client

B. Refuse without discussion

C. Discuss concerns about confidentiality and appropriateness

D. Charge extra for offsite sessions

65. An LMFT learns that a former supervisee received their license through fraudulent documentation. The therapist should:

A. Ignore it since supervision has ended

B. Consider reporting to the BBS to protect the public

C. Contact the supervisee's clients directly

D. Post about it on social media

66. A client who works in childcare describes feeling overwhelmed and occasionally "snapping" at the children. The therapist should:

- A. Report to licensing immediately
- B. Advise the client to quit their job
- C. Ignore work-related stress
- D. Assess the situation clinically and determine if reporting is warranted

67. Under California law, an LMFT may provide services to a client in another state if:

- A. The therapist complies with that state's licensing requirements
- B. The client was originally a California resident
- C. The session is less than 30 minutes
- D. The therapist has malpractice insurance

68. A therapist treating a married couple sees one spouse individually between sessions. During this meeting, the spouse reveals important information about the marriage. The therapist should:

- A. Share with the other spouse immediately
- B. Keep it secret indefinitely
- C. Handle according to the confidentiality policy established for the couple
- D. Terminate couples therapy

69. A client asks the therapist for a prescription for anxiety medication. The therapist should:

- A. Explain LMFTs cannot prescribe and offer a referral
- B. Provide a prescription to help the client
- C. Refuse to discuss medication

D. Recommend specific medications without prescribing

70. An LMFT is asked to provide testimony in a legal case. Before testifying, the therapist should:

- A. Prepare to advocate for their client
- B. Refuse all court involvement
- C. Destroy potentially damaging records
- D. Understand their role and prepare objective testimony

71. A therapist's client mentions that a neighbor's child always seems to have bruises. The therapist should:

- A. Assess the information and report if reasonable suspicion of abuse exists
- B. Ignore secondhand information
- C. Investigate personally before reporting
- D. Only report if the client insists

72. Under California law, therapist-client privilege may be waived by:

- A. The therapist when appropriate
- B. The court in any case
- C. The client or their authorized representative
- D. Insurance companies

73. A client in therapy for depression mentions they sometimes drive after drinking. The therapist should:

- A. Report to law enforcement
- B. Address the behavior clinically as a safety and treatment issue
- C. Terminate for illegal activity
- D. Ignore it as outside the scope of therapy

74. A therapist providing services through a group practice learns the practice is engaging in billing fraud. The therapist should:

- A. Ignore it as an administrative matter
- B. Participate to keep their job
- C. Report only if personally involved
- D. Take appropriate action which may include reporting and refusing to participate

75. A client presents documentation showing they have autism spectrum disorder and requests accommodations in how sessions are conducted. The therapist should:

- A. Work with the client to provide reasonable and clinically appropriate accommodations
- B. Refuse to modify standard practices
- C. Refer to a specialist
- D. Require additional documentation

76. An LMFT notices a pattern of clients terminating after the third session. The therapist should:

- A. Ignore the pattern
- B. Blame clients for lacking commitment

- C. Engage in professional self-reflection and consider consultation
- D. Lower fees to retain clients

77. A client who was sexually abused as a child asks whether they should confront their abuser. The therapist should:

- A. Encourage confrontation for healing
- B. Explore the client's motivations, potential outcomes, and readiness without directing
- C. Advise against confrontation
- D. Contact the abuser on the client's behalf

78. Under HIPAA, which is TRUE about the minimum necessary standard?

- A. It applies to all disclosures without exception
- B. It requires complete records for any valid request
- C. It never applies to treatment communications
- D. It requires disclosing only information needed for the specified purpose

79. A therapist receives a gift basket from a client's employer thanking them for helping the client return to work. The therapist should:

- A. Consider the appropriateness and potential implications before accepting
- B. Accept without question
- C. Report the employer for bribery
- D. Share the gift with the client

80. A client asks the therapist to testify that they are a good parent in an upcoming custody hearing. The therapist should:

- A. Testify as requested to support the client
- B. Refuse any court involvement
- C. Explain limitations of the treating therapist role in custody matters
- D. Agree if the client has been consistent in attendance

81. An LMFT treating a client with an eating disorder learns the client's weight has dropped to dangerous levels. The therapist should:

- A. Continue therapy without medical involvement
- B. Coordinate with medical providers and address the medical emergency appropriately
- C. Terminate until the client gains weight
- D. Report to CPS

82. A therapist suspects a supervisee may have a learning disability that is affecting their clinical work. The supervisor should:

- A. Terminate supervision immediately
- B. Diagnose the supervisee
- C. Report to the BBS
- D. Address the concern supportively and explore options including evaluation and accommodations

83. A client describes using illegal drugs at a party last weekend. The therapist should:

- A. Address it clinically if relevant to treatment goals
- B. Report to law enforcement

- C. Require drug testing
- D. Terminate for illegal activity

84. Under California law, the Good Faith Estimate must include:

- A. Only the first session fee
- B. Guarantee of outcomes
- C. Expected costs for scheduled and anticipated services
- D. Other providers' fees for comparison

85. A therapist's former client sends a friend request on social media two years after termination. The therapist should:

- A. Accept to maintain the relationship
- B. Consider the implications carefully before responding
- C. Report to the BBS
- D. Accept only on professional platforms

86. A client mentions their adult sibling has been acting strangely and might be "losing their mind." The therapist should:

- A. Report the sibling to authorities
- B. Diagnose the sibling based on the description
- C. Contact the sibling to offer services
- D. Explore the client's concerns and provide appropriate support

87. An LMFT providing couples therapy learns that both partners want to continue individually after divorce. The therapist should:

- A. Carefully consider conflicts and typically see only one or neither to avoid conflicts
- B. Continue with both without concern
- C. See whoever pays more
- D. Require them to continue couples therapy

88. A therapist receives a referral from an attorney for a client involved in litigation. The therapist should:

- A. Advocate for the client's legal position
- B. Report everything to the attorney
- C. Clarify role, confidentiality limits, and obtain proper consent
- D. Refuse attorney referrals

89. A client shares that they are planning to leave the country to avoid paying child support. The therapist should:

- A. Address it clinically without reporting
- B. Report to law enforcement
- C. Contact the child's other parent
- D. Refuse to discuss legal matters

90. Under California law, which is TRUE about telehealth informed consent?

- A. Standard consent is sufficient
- B. Verbal consent is adequate for telehealth

- C. No consent is needed for established clients
- D. Specific telehealth consent addressing unique aspects is required

91. A therapist's client asks what would happen to their records if the therapist died unexpectedly. The therapist should:

- A. Explain their professional will and records management plan
- B. Refuse to discuss death
- C. State that records would be destroyed
- D. Admit they have no plan

92. An LMFT treating an adolescent learns the teen is sending nude photos to a romantic partner. The therapist should:

- A. Report to law enforcement immediately
- B. Ignore teen behavior
- C. Assess the situation including ages involved and address clinically and legally as appropriate
- D. Tell the parents immediately regardless of confidentiality agreements

93. A client brings notes to session listing everything they want to discuss. The therapist should:

- A. Refuse structured client input
- B. Use the notes as one source of information while maintaining clinical judgment
- C. Require clients to come unprepared
- D. Follow the client's agenda exclusively

94. A therapist working with trauma survivors experiences intrusive thoughts about client material outside of sessions. The therapist should:

- A. Ignore it as normal
- B. Immediately stop seeing trauma clients
- C. Continue without support
- D. Recognize potential vicarious trauma and seek appropriate support

95. A client mentions that their child's school counselor has been making them uncomfortable with personal questions. The therapist should:

- A. Explore the concern and support the client in taking appropriate action
- B. Report the counselor to the BBS
- C. Contact the school directly
- D. Ignore concerns about other professionals

96. Under California law, which professional responsibility applies even after a client's death?

- A. Duty to continue treatment
- B. Duty to notify family
- C. Duty to maintain confidentiality
- D. Duty to return all fees

97. A therapist notices their own countertransference is consistently negative toward a particular client. The therapist should:

- A. Terminate the client immediately
- B. Seek consultation or personal therapy to address the countertransference

- C. Share negative feelings with the client
- D. Ignore feelings and continue treatment

98. A client asks the therapist to complete a form verifying they are unable to serve on jury duty due to mental health reasons. The therapist should:

- A. Automatically complete all client requests
- B. Refuse all such requests
- C. Automatically refer to a physician
- D. Assess whether clinical justification exists before completing

99. An LMFT treating a client learns the client has been secretly video recording sessions. Under California law, the therapist should:

- A. Address the violation of California's two-party consent law
- B. Continue without comment
- C. Begin recording as well
- D. Report to law enforcement immediately

100. A therapist who is relocating out of state in three months should:

- A. Stop seeing clients immediately
- B. Continue until the last day
- C. Begin discussing termination and transition planning with adequate notice
- D. Transfer all clients without discussion

PRACTICE TEST 8 — ANSWER KEY AND EXPLANATIONS

- 1. B. Verify whether proper authorization exists before providing information** Before providing any information to a probation officer, the therapist must verify that proper authorization exists. Court-ordered clients typically have specific release requirements outlined in their court order. The therapist should confirm authorization before disclosing even basic attendance information.
- 2. D. Address it clinically as a treatment issue** Posting fake negative reviews is unethical behavior but not a mandated reporting situation. The therapist should address it clinically, exploring underlying motivations such as competitiveness, insecurity, or anger, and the potential consequences of such actions.
- 3. A. Board of Behavioral Sciences** The Board of Behavioral Sciences (BBS), which operates under the Department of Consumer Affairs, is responsible for licensing and regulating LMFTs, LCSWs, LPCCs, and LEPs in California. The BBS sets licensing requirements and handles disciplinary matters.
- 4. C. File a mandated report based on reasonable suspicion** Mandated reporters must file when they have reasonable suspicion of child abuse, regardless of who the perpetrator is. The therapist need not confirm abuse or wait for physical evidence. Reasonable suspicion is a low threshold designed to protect children.
- 5. B. Reassure the client that immigration status is confidential** Immigration status is protected by therapist-client confidentiality. Therapists have no obligation to report undocumented status and should reassure clients that this information is confidential. This allows undocumented clients to engage fully in treatment.
- 6. D. Arrange for a qualified substitute supervisor** AMFTs cannot practice without supervision. When a supervisor is unavailable for an extended period, the AMFT must arrange for a qualified substitute supervisor to provide oversight. Practicing without supervision violates California law.
- 7. A. Conduct a thorough risk assessment** Thoughts of harming others require thorough risk assessment even when the client denies intent. The therapist should evaluate specificity, means, history, and other risk factors to determine the level of danger and appropriate intervention.
- 8. C. Ensure ongoing competence and current knowledge** Continuing education requirements exist to ensure therapists maintain and update their knowledge and skills throughout their careers. The field evolves with new research and best practices, and CE ensures practitioners remain competent.
- 9. B. Assess appropriateness and address informed consent for telehealth** Switching to telehealth requires assessment of whether telehealth is appropriate for the client's needs and updated informed

consent addressing telehealth-specific issues such as technology requirements, privacy, emergency procedures, and limitations.

10. D. Address it clinically while maintaining confidentiality Financial misconduct by a client is not a mandated reporting situation. The therapist should address it clinically, exploring ethical implications and underlying issues, while maintaining confidentiality. This is clinical material, not a reporting situation.

11. A. Access their treatment records with limited exceptions Under HIPAA, clients have the right to access their treatment records. Limited exceptions exist, such as when access might endanger the client or others. Clients cannot demand deletion of records or prevent all disclosures.

12. C. Note the observation and explore domestic violence issues appropriately Observing potential signs of domestic violence warrants careful clinical attention. The therapist should note the observation and explore domestic violence issues with the client appropriately, assessing safety and providing resources as needed.

13. B. Verify authorization from the client or their representative before releasing Insurance companies do not have automatic access to records. The therapist must verify that proper authorization exists from the client or, if deceased, from an authorized representative before releasing any information.

14. D. Keep the information confidential per the established policy When the confidentiality policy states that individual disclosures remain confidential, the therapist must honor that agreement. This is why establishing clear policies before beginning couples therapy is essential.

15. A. Correct the error and notify appropriate parties Documentation errors should be corrected promptly and honestly. The therapist should correct the diagnosis error and notify the insurance company. Leaving errors uncorrected or destroying documentation would be unethical and potentially fraudulent.

16. C. Provide accurate information about subpoenas and privilege The client has received misinformation. Therapy records can be subpoenaed, though privilege may protect them from disclosure. The therapist should provide accurate information about how subpoenas and privilege work to correct the misunderstanding.

17. B. Address it as part of treatment planning OCD symptoms interfering with functioning are central to treatment. The therapist should incorporate this into treatment planning, potentially using evidence-based approaches like ERP (Exposure and Response Prevention) or referring if outside their competence.

18. D. Address the dynamic therapeutically in the group Group dynamics, including dominance by one member, are therapeutic material to address in the group context. The therapist should address this pattern in a way that benefits the entire group and helps members develop awareness and interpersonal skills.

19. A. Seven years after termination California law requires LMFTs to retain adult client records for a minimum of seven years following termination of treatment. This retention period ensures records are available for potential future needs.

20. C. Consider the gesture thoughtfully and respond appropriately A self-published book as a gift has both personal and monetary aspects. The therapist should consider the gesture thoughtfully, exploring its meaning while making an appropriate clinical decision about acceptance.

21. B. Refer for medical evaluation while continuing appropriate support When presenting problems appear related to medical conditions, the therapist should refer for medical evaluation while continuing to provide appropriate psychological support. LMFTs cannot diagnose or treat medical conditions.

22. D. Decline to avoid dual relationship complications Accepting a discount from a client creates a dual relationship with potential complications. The therapist becomes financially indebted to the client, which could affect clinical judgment and the therapeutic relationship.

23. A. What a reasonably prudent professional would do in similar circumstances Standard of care is the level of care that a reasonably prudent professional with similar training would provide under similar circumstances. It's not perfection but reasonable professional conduct.

24. C. Verify identity and authorization before disclosing Phone requests require careful verification. The therapist should verify the caller's identity through callback to a verified number and confirm that proper authorization exists before disclosing any information.

25. B. Address it clinically and consider involving parents and school as appropriate Bullying is a clinical issue to address in therapy. The therapist should work with the teen, consider involving parents, and potentially coordinate with the school depending on severity and the teen's preferences within appropriate confidentiality bounds.

26. D. Address it clinically while maintaining confidentiality Benefit fraud is not a mandated reporting situation. The therapist should address it clinically, exploring underlying issues and potential consequences, while maintaining confidentiality.

27. A. The privilege belongs to the client, not the therapist The psychotherapist-patient privilege belongs to the client. Only the client or their authorized representative can waive privilege. The therapist must assert and protect privilege on the client's behalf.

28. C. Assess clinical justification and document appropriately if warranted ESA documentation should only be provided when clinically justified. The therapist should assess whether the client has a mental health condition for which an ESA would provide therapeutic benefit and document the clinical basis.

29. B. Maintain confidentiality and support the client through the process Plans to divorce are confidential information. The therapist should maintain confidentiality and support the client through the decision-making and preparation process without imposing timelines or contacting the spouse.

30. D. Respond appropriately and consult with an attorney if needed Complaints from family members, while not formal BBS complaints, deserve appropriate response. The therapist should handle the situation professionally and consult with an attorney if the complaint might escalate.

31. A. Manage personal reactions and provide objective professional care When personal beliefs conflict with a client's lifestyle, the therapist must manage their own reactions professionally. If the therapist cannot provide objective care, referral may be appropriate, but the first responsibility is professional self-management.

32. C. Mental health treatment if mature enough to participate intelligently Under California Family Code Section 6924, minors 12 and older may consent to mental health treatment if the therapist determines they are mature enough to participate intelligently. This allows adolescents access to needed services.

33. B. Provide access as required by law with limited exceptions Clients have a legal right to access their treatment records under California law and HIPAA. Limited exceptions exist, such as when access might cause harm, but the general rule is that clients may access their records.

34. D. Document accurately and report as required to the referral source Therapists must document and report accurately, even when progress is poor. Falsifying reports to protect clients or misrepresenting treatment outcomes violates ethical standards. Accurate reporting is essential.

35. A. Assess the situation and file a report if child abuse or neglect is suspected Observations during telehealth sessions are valid clinical information. If what's observed raises reasonable suspicion of child abuse or neglect, the mandated reporting obligation applies regardless of how the information was obtained.

36. C. Consider addressing the concern with the colleague given the two-year prohibition California law prohibits sexual relationships with former clients for a minimum of two years. A relationship beginning two months after termination violates this requirement. The therapist should consider addressing this with the colleague or reporting if not resolved.

37. B. Maintain neutrality and explore the client's feelings and options The therapist should remain neutral regarding legal action against a former therapist. The focus should be on exploring the client's feelings, supporting their decision-making process, and maintaining objectivity.

38. D. Ensure clients can make meaningful decisions about treatment The primary purpose of informed consent is to ensure clients have sufficient information to make meaningful decisions about their treatment. While consent has other benefits, client autonomy in decision-making is the fundamental purpose.

39. A. Assess for PTSD and provide appropriate trauma-informed treatment Nightmares and hypervigilance in a veteran suggest possible PTSD. The therapist should assess appropriately and provide trauma-informed treatment within their competence, referring to specialized services if needed.

40. C. Assess whether clinical justification exists and document appropriately Workplace accommodation letters should only be provided when clinically justified. The therapist should assess whether the client's condition warrants the requested accommodation and document the clinical basis for any letter.

- 41. B. Explore the affair as clinically relevant material** An affair is significant clinical material that may relate to relationship issues, individual dynamics, or presenting concerns. The therapist should explore it therapeutically without moral judgment or breach of confidentiality.
- 42. D. Warning the victim, notifying police, or taking other reasonable steps** California's Tarasoff law allows therapists to discharge their duty through various reasonable means including warning the intended victim, notifying law enforcement, taking steps to prevent harm, or a combination of these actions.
- 43. A. Assess whether the punishment constitutes abuse and respond appropriately** Not all corporal punishment constitutes abuse, but the therapist must assess whether it crosses the line. Factors include severity, frequency, injury, and age of children. If abuse is suspected, reporting is required.
- 44. C. Respond appropriately indicating they have no responsive records** Receiving a subpoena for a case with no client involvement requires a response. The therapist should respond appropriately, indicating they have no records or information responsive to the subpoena.
- 45. B. Address the boundary issue and its implications** A client researching and commenting on the therapist's personal life is a boundary issue. The therapist should address this directly, exploring its meaning and implications for the therapeutic relationship and boundaries.
- 46. D. Be truthful in professional communications** Veracity is the ethical principle requiring truthfulness. Therapists must be honest in all professional communications including documentation, testimony, and interactions with clients and colleagues.
- 47. A. Incorporate hoarding into the treatment plan if competent or refer appropriately** Hoarding that emerges during treatment for another condition should be addressed if clinically significant. If competent in treating hoarding, the therapist should incorporate it; otherwise, referral to a specialist is appropriate.
- 48. C. Consider the clinical purpose and respond thoughtfully** Personal questions from clients deserve thoughtful consideration of their clinical purpose. The therapist should consider why the client is asking and whether answering serves therapeutic goals before responding.
- 49. B. Address the pattern and its impact on clients and professionalism** Consistent lateness affects clients and reflects on professionalism. The supervisor should address this pattern directly, exploring causes and emphasizing the impact on client care and professional development.
- 50. D. Address the issue and establish reasonable policies** Unlike service animals, emotional support animals don't have automatic access rights. When an ESA is disruptive, the therapist may address the issue and establish reasonable policies that balance the client's needs with effective therapy.
- 51. A. At the start of treatment** HIPAA requires that the Notice of Privacy Practices be provided at the beginning of treatment. This ensures clients understand their privacy rights and how their information will be used before treatment begins.

52. C. Discontinue the technique and seek appropriate alternatives When research indicates a technique is harmful, the therapist must stop using it regardless of personal experience. Continuing to use harmful techniques violates the principle of nonmaleficence.

53. B. Thank the caller and take appropriate clinical action without confirming the client relationship The therapist can receive information about potential suicide risk without confirming the person is a client. The therapist should thank the caller, take the information seriously, and take appropriate clinical action while maintaining confidentiality.

54. D. Assess the conflict and take appropriate action including possible discussion with the client The children's relationship creates a connection that may affect treatment. The therapist should assess the potential impact and likely discuss this with the client, allowing them to make an informed decision about continuing treatment.

55. A. Address this clinically and encourage communication with the psychiatrist Stopping psychiatric medication without medical guidance is concerning. The therapist should explore the client's reasons, discuss potential risks, and strongly encourage communication with the psychiatrist. Direct contact requires authorization.

56. C. Maintain appropriate professional boundaries while incorporating client input Therapists as clients may have opinions about treatment, but the treating therapist must maintain professional boundaries and clinical judgment. Client input is valuable but doesn't replace professional expertise.

57. B. Reasonable suspicion of child abuse Reasonable suspicion of child abuse is a recognized exception to confidentiality under California's mandated reporting laws. Family requests, embarrassing information, and therapist beliefs about helpfulness are not exceptions.

58. D. Maintain objectivity and evaluate all relevant parties Custody evaluators must maintain objectivity and evaluate all relevant parties including both parents and children. Advocacy or one-sided evaluation violates professional standards for forensic work.

59. A. Assess for safety concerns and address appropriately A client carrying a weapon due to fear of an ex-partner requires safety assessment. The therapist should explore the situation, assess danger from the ex-partner, and address safety planning including the risks of firearm access.

60. C. Discuss implications and potential conflicts before deciding Seeing both spouses individually creates potential conflicts and complications. The therapist should discuss these implications before deciding, considering how it might affect objectivity, confidentiality, and the therapeutic relationships.

61. B. Address it clinically and assess for substance use issues Doctor shopping for pain medications suggests potential substance use disorder. The therapist should address this clinically, assess for addiction or misuse, and integrate this into treatment without reporting to law enforcement.

62. D. Protect the public from incompetent or unethical practitioners The primary purpose of BBS disciplinary processes is public protection. Disciplinary actions remove or restrict practitioners who pose risks to clients, ensuring public safety from incompetent or unethical practice.

63. A. Verify the information and coordinate care as appropriate with proper authorization Learning of a client's hospitalization warrants appropriate response. The therapist should verify the information and, with proper authorization, coordinate care with hospital providers to support treatment continuity.

64. C. Discuss concerns about confidentiality and appropriateness Sessions at a client's workplace raise significant confidentiality and boundary concerns. The therapist should discuss these issues, explaining why standard office settings better protect privacy and therapeutic frame.

65. B. Consider reporting to the BBS to protect the public Fraudulent licensure puts the public at risk. The therapist should consider reporting to the BBS, which can investigate and take appropriate action to protect clients from an improperly licensed practitioner.

66. D. Assess the situation clinically and determine if reporting is warranted Feeling overwhelmed and "snapping" at children warrants careful assessment. The therapist should explore what "snapping" means and assess whether it rises to the level of abuse that requires reporting.

67. A. The therapist complies with that state's licensing requirements Providing services to clients in other states requires compliance with that state's laws. Most states require therapists to be licensed where the client is located, not just where the therapist is located.

68. C. Handle according to the confidentiality policy established for the couple This scenario illustrates why clear confidentiality policies must be established before couples therapy begins. The therapist should follow the established policy regarding individual disclosures.

69. B. Explain LMFTs cannot prescribe and offer a referral LMFTs do not have prescriptive authority. The therapist should explain this scope limitation and offer referral to a psychiatrist or other prescriber who can evaluate the medication request.

70. D. Understand their role and prepare objective testimony Before testifying, therapists should understand their role (fact witness vs. expert witness) and prepare objective testimony appropriate to that role. Neither advocacy nor refusal is appropriate.

71. A. Assess the information and report if reasonable suspicion of abuse exists Mandated reporting obligations apply to information received in therapy, even secondhand. If the information creates reasonable suspicion of child abuse, the therapist must report.

72. C. The client or their authorized representative The psychotherapist-patient privilege belongs to the client. Only the client or their legally authorized representative (such as a guardian or estate executor) can waive the privilege.

73. B. Address the behavior clinically as a safety and treatment issue Driving under the influence is dangerous behavior relevant to treatment. The therapist should address it clinically, exploring underlying issues, discussing risks, and working toward behavior change.

74. D. Take appropriate action which may include reporting and refusing to participate Billing fraud is illegal and unethical. The therapist should refuse to participate and take appropriate action, which may include reporting to relevant authorities. Participation could result in personal liability.

75. A. Work with the client to provide reasonable and clinically appropriate accommodations Clients with disabilities may need accommodations in how therapy is delivered. The therapist should work collaboratively to provide reasonable accommodations that support effective treatment.

76. C. Engage in professional self-reflection and consider consultation A pattern of early termination warrants professional reflection. The therapist should examine their practice, consider consultation with colleagues, and identify potential issues affecting client retention.

77. B. Explore the client's motivations, potential outcomes, and readiness without directing Decisions about confronting abusers are complex and personal. The therapist should explore the client's thoughts, motivations, and readiness without directing them toward or away from confrontation.

78. D. It requires disclosing only information needed for the specified purpose HIPAA's minimum necessary standard requires limiting disclosures to the minimum information needed for the specified purpose. This doesn't apply to treatment communications between providers but does apply to most other disclosures.

79. A. Consider the appropriateness and potential implications before accepting Gifts from third parties related to client treatment raise questions. The therapist should consider potential implications including boundary issues and any effect on the therapeutic relationship before accepting.

80. C. Explain limitations of the treating therapist role in custody matters Treating therapists should not provide custody recommendations. The therapist should explain this role limitation and suggest appropriate resources such as independent custody evaluators.

81. B. Coordinate with medical providers and address the medical emergency appropriately Dangerously low weight in eating disorder treatment requires medical attention. The therapist should coordinate with medical providers and may need to increase level of care to address the medical emergency.

82. D. Address the concern supportively and explore options including evaluation and accommodations If a supervisee appears to have a learning disability affecting clinical work, the supervisor should address this supportively, exploring options like formal evaluation and potential accommodations while maintaining appropriate expectations.

83. A. Address it clinically if relevant to treatment goals Recreational drug use may be clinically relevant depending on presenting concerns. The therapist should address it within the context of treatment goals without moralizing or reporting.

84. C. Expected costs for scheduled and anticipated services The Good Faith Estimate under the No Surprises Act must include expected costs for services that are scheduled or reasonably anticipated. This helps uninsured and self-pay clients understand their financial obligations.

85. B. Consider the implications carefully before responding Social media connections with former clients, even years after termination, require careful consideration. The therapist should consider potential complications before responding to the request.

86. D. Explore the client's concerns and provide appropriate support The client's concerns about their sibling should be explored as part of their treatment. The therapist cannot diagnose or contact the sibling but can support the client in addressing their concerns.

87. A. Carefully consider conflicts and typically see only one or neither to avoid conflicts When couples divorce and both want individual therapy, seeing both creates significant conflicts. The therapist should typically see only one (or neither) to avoid compromising objectivity or confidentiality.

88. C. Clarify role, confidentiality limits, and obtain proper consent Attorney referrals require clear understanding of role and confidentiality. The therapist should clarify whether they're providing treatment or forensic services, explain confidentiality limits, and obtain appropriate consent.

89. A. Address it clinically without reporting Planning to avoid child support is not a mandated reporting situation. The therapist should address it clinically, exploring motivations and implications, while maintaining confidentiality.

90. D. Specific telehealth consent addressing unique aspects is required California law requires specific informed consent for telehealth that addresses its unique aspects including technology requirements, privacy considerations, emergency procedures, and limitations of telehealth services.

91. A. Explain their professional will and records management plan Therapists should have plans for practice continuity in case of death or incapacity. The therapist should be able to explain their professional will and how records would be managed.

92. C. Assess the situation including ages involved and address clinically and legally as appropriate Sexting between minors may have legal implications depending on ages. The therapist should assess the specific situation, provide clinical guidance about risks, and address any reporting obligations based on the circumstances.

93. B. Use the notes as one source of information while maintaining clinical judgment Clients bringing notes can be useful, but the therapist maintains clinical judgment about session focus. The notes provide information but don't dictate the entire session

94. D. Recognize potential vicarious trauma and seek appropriate support Intrusive thoughts about client material outside sessions may indicate vicarious traumatization. The therapist should recognize this and seek appropriate support such as consultation, supervision, or personal therapy.

95. A. Explore the concern and support the client in taking appropriate action The therapist should explore what's concerning the client and support them in addressing it appropriately, whether through direct communication with the counselor, school administration, or formal complaint.

96. C. Duty to maintain confidentiality Confidentiality obligations continue after a client's death. Records remain protected and may only be released to authorized representatives as specified by law.

97. B. Seek consultation or personal therapy to address the countertransference Consistent negative countertransference affects treatment quality. The therapist should seek consultation or personal therapy to understand and address these reactions before they harm the client or therapeutic relationship.

98. D. Assess whether clinical justification exists before completing Documentation for jury duty exemption should be based on clinical justification. The therapist should assess whether the client's condition genuinely prevents jury service before providing documentation.

99. A. Address the violation of California's two-party consent law California requires all-party consent for recording confidential communications. Secret recording by the client violates this law. The therapist should address this directly and discuss the legal and therapeutic implications.

100. C. Begin discussing termination and transition planning with adequate notice Planned relocation requires thoughtful termination planning. The therapist should begin discussions with adequate notice, allowing time for processing, referrals, and proper closure.