

## TELEHEALTH INFORMED CONSENT AGREEMENT AND DISCLOSURE

1. Telehealth is a mode of delivering health care services, including psychotherapy, via communication technologies (e.g. internet or phone) to facilitate diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care.
2. You have a right to confidentiality regarding treatment and related communications via Telehealth under the same laws that protect the confidentiality of treatment information also apply to my Telehealth services.
3. There are risks associated with participating in Telehealth including, but not limited to, the possibility, despite reasonable efforts and safeguards on the part of my therapist, that my psychotherapy sessions and transmission of my treatment information could be disrupted or distorted by technical failures and/or interrupted or accessed by unauthorized persons, and that the electronic storage of my treatment information could be accessed by unauthorized persons.
4. Miscommunication between you and your therapist may occur via Telehealth.
5. There is a risk of being overheard by persons near you and you are responsible for using a location that is private and free from distractions or intrusions.
6. At the beginning of each Telehealth session my therapist is required to verify my full name and current location.
7. In some instances, Telehealth may not be as effective or provide the same results as in-person therapy. If your therapist believes you would be better served by in-person therapy, this will be discussed with you and a referral to in-person services will be provided as needed.
8. While Telehealth has been found to be effective in treating a wide range of mental and emotional issues, there is no guarantee that Telehealth is effective for all individuals. Therefore, benefit from Telehealth, results cannot be guaranteed or assured.
9. Some Telehealth platforms allow for video or audio recordings and neither you nor your therapist may record the sessions without the other party's written permission.
10. The fees charged for Telehealth will be discussed with you, by your therapist, and agree to prior to the first session.
11. Your therapist will make reasonable efforts to ascertain and provide you with emergency resources in your geographic area. Whereas your therapist may not be able to assist you in an emergency, if you require emergency care, you agree to call 911 or proceed to the nearest hospital emergency room for immediate assistance.