



Pediatric Psychological Services

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Consent for In-Person Psychological Services during COVID-19

This Consent for Returning to In-Person Psychological Services is a supplement to the general informed consent that we agreed to at the outset of our clinical work together. Please read this document carefully and let me know if you have any questions.

The threat of COVID-19 is ongoing throughout the United States. As a way to mitigate the risk of exposure to COVID-19, our practice has transitioned to providing many services, including intakes, feedback sessions, and consultations via telecommunications technology. Use of telecommunications technology reduces the need for persons to come into close contact with each other or to be in areas where exposure to COVID-19 may occur. However, in some situations, such as in the case of neuropsychological assessment with children, teletherapy services may not be adequate, and in-person services may be more appropriate.

We have determined that in-person services are appropriate at this time for your situation for the following reason(s):

The scheduled neuropsychological assessment is medically necessary.

The patient and family members that live at home do not have ongoing health conditions or heightened risk factors.

Teassessment services are not clinically indicated in your child's situation.

The decision about whether to engage in in-person services is based on current conditions and guidelines, which may change at any time. It is possible that a return to remote services will be necessary at some point based on consideration of health and safety issues. Such a decision will be made in consultation with you, but I will make the final determination based on a careful weighing of the risks and applicable regulations.

It is also important to consider that, although insurance reimbursement for teletherapy services may have been mandated during the COVID-19 pandemic, such mandates may no longer be in effect, and teletherapy may no longer be reimbursed by your insurance company.

In order for me to provide you with in-person services, the following protocols must be followed by patients/clients and providers:

- Social distancing requirements must be met, meaning that you must maintain a six-foot distance from others while in offices, waiting rooms, and other areas.
- Patients/clients and providers will be required to wear face coverings or masks while in the office and when not able to maintain a six-foot distance.

- Patient/clients will be required to wash their hands or use hand sanitizer at the start of the session and after each break in testing.
- There will be no physical contact with others in the office.
- You will be asked to wait in your vehicle or outside the office until your scheduled appointment time.
- Please take your and your child's temperature prior to our appointment. You agree not to present for in-person services if you have a fever, shortness of breath, coughing, or any other symptoms associated with COVID-19 or if you have been exposed to another person who is showing signs of infection or has confirmed COVID-19 within the past two weeks. Our cancellation policy will be waived in the event that you or your child are showing signs of infection or have been exposed to COVID-19.
- If you are bringing a child or other dependent in for services, you agree to ensure that both you and your child/dependent follow all of these protocols.

As COVID-19 regulations continue to evolve, I may become legally required at some point to disclose that you and I have been in contact, especially if either of us were to test positive or show signs of COVID-19 infection. If I am legally compelled to disclose information, I will inform you and will only provide the minimum necessary information (e.g., your name and the dates of our contact) required by law.

We remain committed to following state and federal guidelines and to adhering to prevailing professional healthcare standards to limit the transmission of COVID-19 in our offices. Despite our careful attention to sanitization, social distancing, and other protocols, there is still a chance that you will be exposed to COVID-19 in our office. If, at any point, you prefer to stop in-person services or to consider transitioning to remote services, please let me know.

By signing below, you acknowledge that you understand that there is still a potential risk of exposure and that you agree to follow the safety protocols outlined above in order to engage in in-person services.

Patient/Client

Date

Alexis Kovacs, Psy.D.
Licensed Psychologist

Date