Informed Consent (TeleHealth)

Please complete this form and email to me at [korey@nutritionforeverybody.com.au](mailto:korey@nutritionforeverybody.com.au) before your first appointment. *ONLY necessary if your appointment is via TeleHealth.*

**Dietetic Services**

As part of providing thorough dietetic services to you, your dietitian will need to collect and record personal information from you, and at times (with your consent) from others. This information will be a necessary part of assessment and treatment that is conducted. You do not have to give all of your personal information, but if you do not this may impact the dietitian’s ability to provide services to you.

**Purpose of collecting and holding information**

Information gathered will be directly related to the assessment, diagnosis, and treatment of your condition. The information is securely stored and will only be seen by the dietitian. The information is recorded in order to document what has happened during each appointment and enables the dietitian to provide relevant and informed services.

**Access to client information**

1. A brief report will be sent to your GP regarding your relevant clinical information and your treatment, as required by Medicare.
2. As a client, you may request access to the information that is kept about you on file. This material will be released to you unless relevant legislation provides otherwise.
3. Your dietitian may discuss your information with others only if:

a) It is subpoenaed by a court or if disclosure is otherwise required or authorized by law; or

b) Failure to disclose the information would place you or another person at serious and imminent risk; or

c) Your approval has been obtained to provide a written report to another professional or agency. e.g. specialist or lawyer; or

d) Your prior approval has been obtained to discuss the material with another person, e.g. a parent or employer.

e) Your dietitian, with your consent, is collaborating with a psychologist or other professional within Person Centred Psychology and Allied Health

**Confidentiality**

All personal information gathered by the dietitian during the provision of the service will remain confidential and secure except where there is serious or imminent risk to the client or another person, or the information is required by the law.

**Requirement to provide contact details and location**

When sessions are conducted by videoconference, your dietitian needs to be able to contact support people in your locality should any issues arise. Please provide the names and contact details of at least 2 people known to you before commencing treatment. Because you may be in varied locations for each of our videoconferences, I will require you to provide your location at the commencement of each session.

**Privacy in online communications**

The privacy of any form of communication via the internet or a mobile device is potentially vulnerable and limited by the security of the technology. For example, for therapy sessions conducted over Zoom, your dietitian cannot guarantee that each connection is entirely secure and free from potential interference. Email communication is also not secure and should contain minimal personal information. Email is used for administrative purposes such as setting up appointments. Invoices and receipts will be emailed as a word document attached to an email, and the word document will be protected by a password that we agree upon together.

Suggestions will be provided to help you protect your own online privacy during sessions. Please be aware that you are responsible for any costs incurred in relation to the provision of your own internet, hardware and data usage associated with this TeleHealth service.

**Use of therapy session materials**

Recordings of sessions will not be made, and material from sessions will not be used for purposes other than delivering a service to you. I will seek your written consent if I wish to use material for other purposes (such as consultation with colleagues). We ask that your dietitian’s privacy be protected by not making recordings of sessions and not using materials from sessions for purposes other than therapy. If you wish to record sessions or use session material for other purposes, you must seek your dietitian’s consent to do so.

**Fees**

The cost of your consultation depends on the scope of practice of your dietician as outlined below:

Dietician: $120 Initial Session (50 minutes), $70 Subsequent Sessions (30 minutes) (Medicare rebate of $52.95)

This will be payable prior to or following the session by direct deposit or via \_\_\_\_ online payment services.

**Cancellation Policy**

If you need to cancel or postpone an appointment, please give at *least 48 hours notice*, otherwise you will be charged 50% of your appointment as a cancellation fee. Failure to attend a TeleHealth appointment without notice, or cancellation within the same business day, will attract a 100% cancellation fee. These are not eligible for rebate.

I       have read, understood and agree to these conditions.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

Please Note: If after reading this document you are at all unsure of what is written, please discuss it with your dietitian.