



Telepsychiatry Informed Consent

Telepsychiatry is the delivery of psychiatric services, online, using interactive audio and visual electronic systems where the psychiatrist and the patient are not in the same physical location. Round Rock Psychiatry allows Dr. Calzada to perform telepsychiatry for any appointment, but only through the telemedicine service provider **Doxy.me, LLC**. The interactive electronic systems used by Doxy.me incorporate network and software security protocols to protect the confidentiality of patient information and audio/visual data. These protocols include measures to safeguard the data and to aid in protecting against intentional or unintentional corruption.

Potential telepsychiatry benefits include patient convenience, increased accessibility to psychiatric care, and increased privacy and confidentiality; as you, the patient, would not have to travel to the clinic but would be able to attend appointments from the comfort of your home or office, or any place of your choosing (within the state of Texas) utilizing any desktop or laptop computer, tablet or smartphone.

Potential Telepsychiatry Risks include information being transmitted over the internet, and in some instances may not be sufficient (e.g., poor resolution of video) to allow for appropriate medical decision-making by Dr. Calzada. Also, delays in psychiatric evaluation and treatment could occur due to deficiencies or failures of the equipment (although the appointment could be concluded over the telephone at no extra charge). Other risks include failure of security protocols resulting in a breach of privacy of the patient's confidential medical information. In rare cases, a lack of access to all the information that might be available during an in-office visit, but that may occur in a telepsychiatry session, could result in the omission of care involving other health problems or possible adverse drug interactions.

If Dr. Calzada decides that the benefits outweigh the risks, he may request telepsychiatry sessions when the patient schedules follow-up appointments. If Dr. Calzada agrees, the patient will be scheduled for a telepsychiatry session, and will be sent an internet link (to <http://Doxy.me>) via email or telephone with instructions to log into the "waiting room" immediately prior to my scheduled appointment.

Patient Rights ("I" and "My" refers to you the patient): (1) I understand that all laws protecting the privacy and confidentiality of medical information also apply to telepsychiatry. (2) I understand that all the Texas rules and regulations which apply to psychiatry also apply to telepsychiatry. (3) I understand that my psychiatrist has the right to withhold or withdraw his consent for the use of telepsychiatry at any time during the course of my care. (4) I understand that I have the right to withhold or withdraw my consent for the use of telepsychiatry at any time during the course of my care, and withdrawal of my consent will not affect any future care or treatment from my psychiatrist.

My Responsibilities: (1) I understand that I must be physically within Texas (including offshore State waters) to be eligible for telepsychiatry, and my psychiatrist can send prescriptions for medications only to Texas pharmacies or addresses. I will inform my psychiatrist as soon as my session begins of my physical location. (2) I will ensure the proper configuration and functioning of all my electronic equipment **prior to my session** because the computer, tablet, or mobile telephone I use must have working camera and audio input so that my psychiatrist can see and hear me in real time. (3) I will not record any telepsychiatry sessions without prior written consent from Dr. Calzada and I understand that my psychiatrist will not record any of my telepsychiatry sessions without my prior written consent. (4) I will inform my psychiatrist as soon as my session begins if any other person can hear or see any part of our session. (5) If I lose my connection during a session, I will immediately attempt to log back into the <http://Doxy.me> "waiting room." (6) If the audio I am receiving during a telepsychiatry session is not complete and clear, I will attempt to let my psychiatrist know or connect via telephone to complete the appointment or schedule a new appointment.

Patient Consent to the Use of Telepsychiatry: I have read and understand the information provided above regarding telepsychiatry. I hereby give my informed consent for the use of telepsychiatry in my medical care and authorize Dr. Calzada to use telemedicine in the course of my diagnosis and treatment. I agree to hold Round Rock Psychiatry and Dr. Calzada harmless from injuries or omissions that may be related to the limitations, malfunction or technical failure of equipment or system encryption.

Printed name

Date

Signature of patient (or parent, legal guardian, or conservator)

(Relationship to patient)