

TELETHERAPY INFORMED CONSENT

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This document is an addendum to Dr. Victoria Balenger's Informed Consent form and covers the use of telehealth/teletherapy services. Teletherapy is an option for conducting remote sessions over the internet where you will be able to speak to and see your therapist, counselor or coach on a screen. Teletherapy means the use of interactive audio, video, or other telecommunications or electronic media by a psychologist to deliver services. Teletherapy does not include an audio-only conversation between the psychologist and the client, an electronic email message between the psychologist and the client, or a text message or other type of message sent between the psychologist and the client. The decision to offer teletherapy will be made by the psychologist based on client's needs, and will be reevaluated as necessary. In situations in which the psychologist determines that teletherapy is not recommended, she will assist you in identifying appropriate alternative services, including in-person options.

At the time of your teletherapy session(s), you or your psychologist will be located in the State of Maryland. Dr. Balenger is primarily utilizing Zoom, a secure video-conferencing platform approved by the University of Maryland Behavioral Health Service and other mental health providers. In keeping with State of Maryland privacy laws and regulations, your psychologist will continue to follow approved procedures for record-keeping and all records will be discarded as required by applicable law.

If teletherapy becomes an option of service for you, your psychologist will give you detailed directions regarding how to log in securely and proceed. It is strongly recommended that you only communicate through a computer or device that you know is safe (e.g., has a firewall, anti-virus software installed, is password protected, not accessing the internet through a public wireless network, etc.). Your psychologist will be using secure electronic medium in a private location.

You understand that the implementation of teletherapy is still innovative and, as such, the psychologist may experience some challenges. Although teletherapy offers the advantage of continuation of care when in-person services are not possible, there could be some limitations to teletherapy including but not limited to technological failure and miscommunication. Your psychologist will provide you instructions on how to proceed in each of those situations and will discuss such instructions with you. You are responsible for securing privacy in terms of the location where you will connect to the session. You will not be charged any late or cancellation fees if cancelling due to illness. **In case of an emergency, please go to your nearest hospital or dial 911.**

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Signature Page

I, _____, consent to teletherapy sessions as outlined in this contract. I understand that I may withdraw my consent at any time; and if not feasible to continue with in-person services, the psychologist will provide appropriate referrals and facilitate my transition to a different psychological services provider.

Client/Patient Signature*

Date

Practitioner Signature

Date

*This consent may be signed in several counterparts and all counterparts, combined, shall constitute a valid consent even though all parties have not signed the same counterpart.