

## TELEHEALTH INFORMED CONSENT FORM

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Telehealth can include the practice of healthcare delivery, diagnosis, consultation, treatment, transfer of medical data, and education using interactive audio, audio-video, or data communications. It may also involve the communication of medical/mental information, both orally and visually, to healthcare practitioners located in California or outside of California. You, the client, have:

- 1) The right to withhold or withdraw consent at any time without affecting your right to future care, or treatment, nor risking the loss or withdrawal of any program benefits to which you would otherwise be entitled.
- 2) Protection of confidentiality, by law, of medical/mental information which also applies to telehealth. You are aware of, and agree with these laws; as described in the Informed Consent Form that you were provided and understand that the dissemination of any personally identifiable images or information from the telehealth interaction to researchers or other entities shall not occur without written consent.
- 3) Understanding that there may benefit from telehealth, but that results cannot be guaranteed or assured.
- 4) Understanding that there are risks and consequences with telehealth, including, but not limited to, the possibility, despite reasonable efforts on your therapist's part that:
  - The transmission of medical information could be disrupted or distorted by technical failures; the transmission of medical information could be interrupted by unauthorized persons.
  - The electronic storage of medical information could be accessed by unauthorized persons.
  - telehealth-based services may not be as complete as face-to-face services.
  - If your therapist believes you would be better served by face to face psychotherapy, she will either wait to continue treatment until such a meeting with her is feasible, or refer to a psychotherapist who can provide such services in my area if she happens to be away.

You will make sure that your therapist has your current home address on file at all times. If you have a landline, note that on your Intake Form.

If you are ever experiencing a life-threatening emergency, you will call 911 or go to the nearest emergency room. If you are in session and your therapist needs to call 911 for you, you will make sure she knows your preferred local hospital, as noted in your Intake Form.

You will let your therapist know where the session is taking place and will provide the physical address if it's not the home address. If the session location ever changes, you will inform your therapist and provide information regarding the nearest hospital.