

# TriCircle

## INFORMED CONSENT CHECKLIST FOR TELETHERAPY SERVICES

Prior to starting video-conferencing services, we discussed and agreed to the following:

- Potential benefits and risks of video-conferencing (e.g. limits to patient confidentiality) differ from in-person sessions.
- Confidentiality still applies for teletherapy services, and nobody will record the session without the permission from the other person(s).
- We agree to use the video-conferencing platform selected for our virtual sessions, and the psychologist will explain how to use it.
- Use of a webcam or smartphone is needed during the session.
- It is important to be in a quiet, private space that is free of distractions (including cell phone or other devices) during the session.
- It is important to use a secure internet connection rather than public/free Wi-Fi.
- It is important to be on time. If you need to cancel or change your tele-appointment, you must notify your provider in advance by phone or email.
- A back-up plan (e.g., phone number where you can be reached) to restart the session or to reschedule it in the event of technical problems is necessary.
- Provide a safety plan that includes at least one emergency contact and the closest ER to your location in the event of a crisis situation.
- If you are not an adult, the permission of your parent or legal guardian (and their contact information) is needed for you to participate in teletherapy sessions.
- You should confirm with your insurance company that the video sessions will be reimbursed; if they are not reimbursed, you are responsible for full payment.
- As your therapist, I may determine that, due to certain circumstances, teletherapy is no longer appropriate, and we should resume our sessions in-person.

Provider's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Patient's Name: \_\_\_\_\_

Signature of Patient/Patient's Legal Representative: \_\_\_\_\_

Date: \_\_\_\_\_