

## **TELEHEALTH CONSENT FORM**

I consent to engage in telehealth with Karen Seif, MA, LMFT as part of the therapy process and my treatment goals. I understand that telehealth psychotherapy may include mental health evaluation, assessment, consultation, treatment planning, and therapy. Telehealth will occur through an interactive audio and video telecommunication platform.

### CONSENT FOR TELEHEALTH CONSULTATION AND TREATMENT:

1. I have the right to withhold or remove consent for telemedicine at any time without affecting my right to future care or treatment, nor endangering the loss or withdrawal of any program benefits to which I would otherwise be eligible.
2. My mental health care provider explained to me how the video conferencing technology that will be used will not be the same as a direct client/health care provider visit due to the fact that I will not be in the same room as my provider.
3. I understand that a telehealth has potential benefits including easier access to care and the convenience of meeting from a location of my choosing.
4. I understand there are potential risks to this technology, including interruptions, unauthorized access, and technical difficulties. I understand that my mental health care provider or I can discontinue the telehealth consult/visit if it is felt that the videoconferencing connections are not adequate for the situation.
5. I have had a direct conversation with my provider, during which I had the opportunity to ask questions in regard to this procedure. My questions have been answered and the risks, benefits and any practical alternatives have been discussed with me in a language in which I understand.
6. I understand that my insurance coverage may not guaranteed payment of telehealth services and fees are patient responsibility if uncovered.
7. I understand that I must notify my therapist of my physical location prior to my session. My therapist is only able to practice in the state of New Mexico and cannot cross state lines for telemedicine sessions. I also understand that my physical location is necessary if there is need to call emergency services on my behalf. Crisis sessions in general are not appropriate for telehealth and if I am in a crisis or emergency or if I feel unsafe I should call 911 or proceed to the nearest emergency room. I understand if I am feeling suicidal that I should call 911.

## CONSENT TO USE THE TELEHEALTH BY GOOGLEMEET

Telehealth by GoogleMeet is the technology service we will use to conduct telehealth videoconferencing appointments. It is simple to use and there are no passwords required to log in. By signing this document, I acknowledge:

1. Telehealth by GoogleMeet is NOT an Emergency Service and in the event of an emergency, I will use a phone to call 911.
2. Though my provider and I may be in direct, virtual contact through the Telehealth Service, neither GoogleMeet nor the Telehealth Service provides any medical or healthcare services or advice including, but not limited to, emergency or urgent medical services.
3. The Telehealth by GoogleMeet facilitates videoconferencing and is not responsible for the delivery of any healthcare, medical advice or care.
4. I do not assume that my provider has access to any or all of the technical information in the Telehealth by GoogleMeet Service – or that such information is current, accurate or up-to-date. I will not rely on my health care provider to have any of this information in the Telehealth by GoogleMeet Service.
5. To maintain confidentiality, I will not share my telehealth appointment link with anyone unauthorized to attend the appointment.

By signing this form, I certify:

- That I have read or had this form read and/or had this form explained to me
- That I fully understand its contents including the risks and benefits of the procedure(s).
- That I have been given ample opportunity to ask questions and that any questions have been answered to my satisfaction.

## IN CASE OF EMERGENCY

In the event of an emergency where I cannot reach my therapist by phone. I will take the following steps:

New Mexico Crisis and Access Line (NMCAL) 855-662-7477

Agora Crisis Center 855-505-4505, 505-277-3013, 800-273-TALK

Or go to the nearest emergency room