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INFORMED CONSENT CHECKLIST FOR TELEPSYCHOLOGICAL SERVICES

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

- There are potential benefits and risks of video-conferencing (e.g. limits to patient confidentiality) that differ from in-person sessions. The nature of electronic communication technologies is such that I cannot guarantee that our communications will be kept confidential or that other people may not gain access to our communications. I have made every effort to ensure a HIPAA compliant technology format, but there is always a risk that our electronic communications may be compromised.
- The extent and limits of confidentiality that I have outlined in my Welcome to My Practice policies still apply in telepsychology.
- Confidentiality still applies for telepsychology services, and nobody will record the session without the permission from the other person(s). I will maintain written records in the same way that I maintain in-person sessions.
- We agree to use the "doxy.me" website for our virtual sessions, and I will text you a link for this free and HIPAA compliant service prior to our virtual session.
- You will need to use a webcam or smartphone 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 the psychologist 48 hours advance by phone as my 48 hour cancellation policy will still be in place.
- We have 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.
- If there is a technological failure and we are unable to resume our session, you will only be charged the prorated amount of actual session time.
- We agree that in the event of a crisis or emergency, you will call 911 or head to the closest emergency room.
- If you are not an adult, we have the permission of your parent or legal guardian (and their contact information) for you to participate in telepsychology 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.
- The same fee rates will apply for telepsychology as apply for in-person therapy. Credit cards or checks are acceptable for payment and, with your permission, credit card information will be stored in a first level PCI compliant merchant service system so that I do not have to ask you for credit card information every session.
- As your psychologist, I may determine that due to certain circumstances, telepsychology is no longer appropriate and that we should resume our sessions in-person.

Psychologist Name / Signature:

Patient Name:

Signature of Patient/Patient's Legal Representative:

Date: