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INFORMED CONSENT FOR TELEPSYCHOLOGICAL SERVICES

Prior to starting video-conferencing services, we discussed and 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. Signing this consent means you agree to use non-secure means of communication.
- Confidentiality still applies for telepsychology services, and neither of us will record the session without mutual permission.
- You agree to use the video-conferencing platform selected for our virtual sessions, and Dr. Woodrow will explain how to use it. In case of technical difficulty, we will use telephone to attempt to resolve it.
- You need to use a webcam or smartphone during the session, and need to provide an email address.
- It is important to be in a quiet, private space that is free of distractions (including cell phone, other devices or other persons) 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 Dr. Woodrow 24 hours in advance by phone or email.
- We need 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.
- We need a safety plan that includes at least one emergency contact and the closest ER to your location, in the event of a crisis situation.
- You should confirm with your insurance company that the audio-video sessions will be reimbursed; if they are not reimbursed, you are responsible for a negotiated payment. It is unlikely that telephone only sessions will be covered.
- 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.

Jane Z. Woodrow, Ph.D. _____

Patient Name: _____

Signature of Patient/Patient's Legal Representative: _____

Date: _____