

Informed Consent  
For Phone or Video Chat Sessions

Here are some key issues regarding phone or video chat psychotherapy sessions. SPC clinicians do not do psychotherapy over text or email.

1. We have a phone or video chat session when we are both in Illinois due to licensing requirements.
2. No method of communication is completely confidential. However, the standard for phone and video chat services is end-to-end encryption and to save only the metadata (who was called and how long the call lasted). It is important to use a secure internet connection rather than public/free wi-fi.
3. Patients need to use a webcam or smartphone during the session for video appointments.
4. SPC has reviewed the technologies and determined that doxy.me has end-to-end encryption, a business associate agreement, and is HIPAA compliant. This platform is preferred for video chat; however, a simple phone call is also a method for telepsychology.
5. At the time of your phone or video session, please be in a quiet place where you will not be distracted or interrupted and your session will not be overheard.
6. Potential benefits to phone or video chat sessions:
  - a. We may need to temporarily resort to alternatives to face-to-face appointments if restrictions associated with COVID-19 precautions are in place.
7. Potential risks and costs to phone or video chat sessions:
  - a. There may be less nonverbal communication than for an in-person session.
  - b. With any technology, there is always the risk of being inadvertently disconnected. If a call or chat session is disrupted at any time, your SPC clinician will attempt to re-establish connection.
8. You will need to assume responsibility to maintaining confidentiality on your end of the session. You accept responsibility to secure any phone or computer you may use for our session.
9. We need a phone number where you can be reached, and at least one emergency contact and the closest ER to your location, in the event of a crisis situation.
10. As with any psychotherapy session, you are ultimately responsible for payment. Please check with your health insurance policy to see whether phone or video chat sessions are covered.

I understand the above information and I consent to using phone or video chat for psychotherapy, and I understand that I can withdraw my consent to phone or video chat sessions at any time.

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DATE

\_\_\_\_\_  
SIGNED (Patient 12+ years)

\_\_\_\_\_  
DATE

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SIGNED (Parent/Guardian)