

# Telemedicine Informed Consent

**Diana Tumminia, LCSW – R**

Please note these are general guidelines of practice for clients seeking to engage in telemedicine services and may or may not be applicable to psychotherapy telehealth sessions you are participating in.

## **Introduction:**

Please read this document thoroughly and completely.

To better serve the needs of the community, health care services are now available by interactive video communications and/or by the electronic transmission of information. This process is referred to as “telemedicine.” Telemedicine involves the use of electronic communications to enable physicians and other healthcare professionals (“Treatment Providers”) at different locations to share individual patient medical information for the purpose of improving patient care. Treatment Providers may include, but are not limited to, psychiatrists, psychologists, nurses, counselors, clinical social workers, and marriage and family therapists.

The information may be used for healthcare delivery, diagnosis, treatment, transfer of medical data, therapy, consultation, follow-up and/or education, and may include any of the following:

- Patient medical records
- Medical images
- Live two-way audio and video
- Output data from medical devices and sound and video files

Electronic systems used will incorporate network and software security protocols to protect the confidentiality of patient identification and imaging data and will include measures to safeguard the data and to ensure its integrity against intentional or unintentional corruption. Since this may be different than the type of consultation with which you are familiar, it is important that you understand and agree to the following statements.

## **Expected Benefits:**

1. Improved access to medical care by enabling a patient to remain at a remote site while the Treatment Provider obtains test results and consults from healthcare practitioners at distant/other sites.
2. More efficient medical evaluation and management.
3. Obtaining the expertise of a distant specialist.

## **Possible Risks:**

Although rare, there are potential risks associated with the use of telemedicine. These risks include, but may not be limited to:

1. Information transmitted may not be sufficient (e.g. poor resolution of images) to allow for appropriate medical decision making by the Treatment Provider and consultant(s);
2. Delays in medical evaluation and treatment could occur due to technical deficiencies or failures;
3. The transmission of patient’s medical information could be interrupted by unauthorized persons; and/or the electronic storage of my medical information could be accessed by unauthorized persons; and
4. A lack of access to complete medical records may result in adverse drug interactions or allergic reactions or other judgment errors.



I hereby authorize Diana Tumminia, LCSW - R to use telemedicine in the course of my diagnosis and treatment.

**Name:**

**Date:**

**Signature:**