



College of Education

Belin-Blank Center

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INFORMED CONSENT CHECKLIST FOR TELEPSYCHOLOGY SERVICES

I consent to participate in telepsychology, and I understand and agree to the following:

- There are potential benefits and risks of video-conferencing that differ from in-person sessions. Importantly, there are greater risks to confidentiality, some of which depend on the setting in the client chooses to complete the session.
- Confidentiality still applies for telepsychology services, and nobody will record the session without the permission from the others person(s).
- We agree to use Zoom for our virtual sessions, and the psychologist will explain how to use it.
- The client needs 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 the client needs to cancel or change their tele-appointment, they must notify the psychologist in advance by email.
- We need a back-up plan (e.g., phone number where client 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 in the event of a crisis situation.
- If the client is a minor, we need the permission of the client's parent or legal guardian (and their contact information) for the client to participate in telepsychology sessions.
- The client should confirm with their insurance company that the telehealth will be reimbursed.
- The psychologist may determine that, due to certain circumstances, telepsychology is no longer appropriate and that we should resume our sessions in-person.

Psychologist Name	Signature	Date
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Client Name	Signature of Client/Legal Guardian	Date
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Phone Number	Physical Location of Client During Telehealth sessions
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Emergency Contact Name	Emergency Contact Phone Number
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