



Cowell Center – Student Health Services (SHS) CONSENT FOR TELEMEDICINE TREATMENT

Patient Name: _____ **Patient ID #:** _____ **Date of Birth:** _____

Address where Patient Will Be during TPT: _____ **Cell Phone #:** _____

TMT refers to telemedicine services that occur via phone or videoconference using a variety of technologies. These services may also include prescribing medication, scheduling appointments, communicating via secure messaging systems within the electronic medical record, electronic scheduling, providing case management services (e.g., referrals) and providing educational materials. TMT is offered to improve access to treatment services to registered SCU students when significant barriers to access medical services exist and to preserve continuity of care. The results of TMT cannot be guaranteed or assured. You are not required to use TMT and have the right to request other service options or withdraw this consent at any time without affecting your right to future treatment at SCU SHS.

TMT services may not be appropriate, or the best choice of service for reasons including, but not limited to:

- patient's reporting symptoms indicating the need for immediate evaluation.
- lack of access to, or difficulty with, communications technology;
- significant communications service disruptions

In these cases, SHS front office staff, SHS provider and/or the Cowell Center Case Manager will help you establish referrals to other appropriate services.

TMT services are conducted and documented in a confidential manner according to applicable laws in similar ways as in-person services.

However, there are additional risks including, but not limited to:

- TMT visits, evaluations or treatments could be disrupted, delayed, or communications distorted due to technical failures.
- TMT involves alternative forms of communication that may reduce visual and auditory cues and increase the likelihood of misunderstanding one another.
- Difficulties in accessing all necessary medical information can result in errors in adverse drug interactions, allergic reactions, and other errors in clinical judgment.
- Your clinician may determine TMT is not an appropriate treatment option or stop TMT treatment at any time if your condition changes or TMT presents barriers to treatment.
- In rare cases, security protocols could fail and your confidential information could be accessed by unauthorized persons.
- Providers may not be able or be delayed in providing medical treatment using electronic communication or provide for or arrange for emergency care.

SCU SHS works to reduce these risks by using secure Zoom video conferencing software and these policies and procedures:

- You may only engage in TMT services when you are physically in California. Your provider will confirm this at each session.
- You may be requested to conduct in person face-to-face evaluations, physical tests, or labs.
- You and your provider will engage in appointments only from a private location where you will not be overheard or interrupted.
- You will use your own computer/device and ensure that the computer/device has updated operating and anti-virus software.
- You will use a secure internet connection rather than a public, free, or unsecure Wi-Fi connection.
- You will not record any appointments, nor will SCU SHS record your appointments without your written consent.
- You will discuss any concerns about TMT sessions with your provider.
- You will give your provider a correct phone number where you can be reached which you will have during appointment times. If you are unable to connect or get disconnected, please try again or your provider will contact you by phone.
- You will only communicate with your provider through the Cowell Center Portal between appointments.
- You understand that phone communication may not be secure and email communications are not a confidential method of communication and will be stored as treatment records.
- You will provide contact information for at least one emergency contact in your location who SCU SHS may contact if needed.

Emergency Contact Name: Phone: Relationship:

SCU SHS cannot provide 24-hour emergency management, particularly to those using services at a distance. If we believe you are in need of emergency care and we are unable to reach you, we may call your emergency contact or local emergency service providers. If you are ever experiencing an emergency or urgent medical need, please do not communicate via the Cowell Center Portal, e-mail, faxes, text messages, and you agree to:

- Seek medical care via a local provider
- Call 911, or go to the nearest emergency room

I have read and understand the above information and all my questions have been answered. I hereby give informed consent to SHS to use Telemedicine Treatment in my care.

Signature of Patient: _____ **Date:** _____