Inner Compass Counseling, LLC

Electronic Communication Informed Consent

CLIENTS MUST CONSENT TO THE USE OF ELECTRONIC COMMUNICATION FOR CONFIDENTIAL MEDICAL INFORAMTION AFTER HAVING BEEN INFORMED OF THE FOLLOWING:

ELECTRONIC COMMUNICATION SECURITY AND CONFIDENTIALITY CANNOT BE GUARANTEED DUE TO THE FOLLOWING POTENTIAL RISK FACTORS:

- ❖ Unintended recipients may receive the information
- ❖ Information may forwarded to others without the client's permission
- ❖ Electronically transmitted information can be more readily falsified than written information
- ❖ Information may be sent to the wrong destination or recipient
- ❖ Despite deletions of electronic information, that information may still exist within the electronic systems

THEREFORE, CONSENT TO THE USE OF ELECTRONIC COMMUNICATION FOR CONFIDENTIAL MEDICAL INFORMATION INCLUDES AGREEMENT WITH THE FOLLOWING CONDITIONS:

- ❖ Electronic communication includes email, text messages and faxed information
- ❖ The client and therapist must agree to the appropriate use of electronic communication
- ❖ All electronic communication regarding confidential medical information will be also printed and maintained in the client's file
- ❖ Due to security risks, caution in the use of electronic communication is essential
- ❖ Client's do not have a right to privacy within their employer's email systems, and therefore it should not be used to send or receive confidential medical information
- ❖ The client is responsible for informing the therapist of any type of information the client does not want to sent electronically
- ❖ Use of electronic communication with the therapist does not ensure immediate response from the therapist; urgent communication should be made by phone.
- ❖ Emergencies cannot be handled with electronic communication. In the case of emergencies, contact Trish Miller, LCSW by phone.
- ❖ This consent is valid for the entire course of treatment and may be withdrawn by the client, in writing, at any time.

Client's Signature_____ Date _____

Therapist's Signature_____ Date _____