

Telehealth Consent Addendum

Complete this addendum before receiving psychological services by telephone, video, or another remote method. It supplements the consent and office policies above. Scheduling or billing messages alone do not constitute a telehealth treatment session.

Technology and communication arrangements

Secure platform or technology: Doxy.me. Dr. Short's waiting room: <https://doxy.me/iamdrshort>

Dr. Short's telehealth contact (480) 329-5359 Backup phone (480) 329-5636 (Aimee)

Client contact _____ Backup contact _____

For sessions without video, identity will be verified by name and scheduling details.

Dr. Short will confirm your physical location at each session. Services can be provided only when legally authorized in the location where you are physically present. [See service locations here](#). Tell Dr. Short before traveling or changing locations.

Privacy and limitations

Telehealth may improve access and convenience, but it may limit observation of nonverbal behavior, assessment, or the response to an emergency. Technology continues to change. In-person treatment or referral may be recommended when remote care does not adequately meet your needs.

Electronic communication carries risks, including interception, unauthorized access, and technical failure despite reasonable safeguards. Use a private location, a secure connection, and a device others cannot readily access. Identify anyone present or able to hear the session. Neither party may record a session without separate prior permission.

Clinical electronic communications will use the secure system identified above. Access credentials will be restricted, recipient information checked, and messages accessed privately. Messages will be retained in the clinical record or approved secure system. No system can guarantee privacy.

Disruptions

If the connection fails, stop using the disrupted connection and use the backup telephone numbers above to re-establish contact. If reliable and private contact cannot be restored, the session will be rescheduled or another clinically appropriate arrangement made. In-person care or another agreed secure method may be used if technology, privacy, clinical needs, or safety makes the usual method unsuitable.

Client or legally authorized signature

Date