



Informed Consent for Telepsychiatric Healthcare

Telepsychiatry is the delivery of psychiatric services using interactive audio and visual electronic systems where the psychiatrist and the patient are not in the same physical location. The interactive electronic systems used in telepsychiatry incorporate network and software security protocols to protect the confidentiality of patient information and audio and visual data. These protocols include measures to safeguard the data and to aid in protecting against intentional or unintentional corruption.

Name

DOB

I hereby give consent for medically necessary treatment, psychological care, and psychiatric care including emergency medical treatment by health care providers affiliated with the University of South Florida (USF) Student Health Services, USF Counseling Center, and the USF Physicians Group via telemedicine.

Mandated Reporting:

SHS Behavioral Health Staff adhere to professional, ethical and legal guidelines established by the State of Florida and Federal Laws. Your health information will not be discussed with anyone outside SHS or the Counseling Center without your permission. The following circumstances are however, exceptions to the law:

- You are considered to be harmful to yourself or others
- Child Abuse is disclosed
- Elder Abuse is disclosed
- Abuse of a Disabled person is disclosed
- A court order

In these circumstances we may find it legally necessary to disclose information to appropriate authorities.

Signature of Patient

Date

Print Name of Patient

Signature of Witness

Date

Print Name of Witness