

PSYCHOLOGY PRIVATE PRACTICE

Flavio R. Epstein, Ph.D. Cédula OPP # 23475 CA Lic. #: 21727 WhatsApp: 910 726 876

INFORMED CONSENT

The patient information contained in the evaluation and follow-up are confidential according to the law and ethics and code from the Ordem dos Psicólogos Portugueses (Portuguese Board of Psychology) the patient's personal and health information are private and confidential and belong exclusively to the patient.

I _____, citizen or resident card or passport number: _____, living at _____ voluntarily consented on ____/____/202__ to an initial psychology consult at the cost of 75 euros (or 80 US dollars), and I was informed that in order to continue with the psychotherapeutic process that the cost would be 75 euros (or 80 US dollars) per session. These services may be delivered in-person or online, or in a combination (hybrid), at the same cost per consult or session.

I consent to the communication between Dr. Flavio Rose Epstein and other medical providers.

I agree to canceling appointments at least 24 hours prior to the scheduled appointment day and time. For the best results in psychotherapy to be achieved, weekly sessions are recommended.

Lisboa, _____ de _____ de 202__

Dr. Flávio Rose Epstein

Membro da Ordem dos Psicólogos Portugueses: 23475

California Licensed Psychologist: PSY21727

Acknowledged by Mr./Mrs./Ms.:

INFORMED CONSENT – TELEBEHAVIORAL HEALTH

Technology is in continuous development and has become an important and frequently used means of communication, now more than ever before. Telecommunication creates possibilities that support real live contact among people, resembling in-person meeting.

Nevertheless, the central tool in psychological intervention is the therapeutic relationship, and any changes will potentially impact the interventions. It is important, therefore, that patients who seek telebehavioral health services through videoconference, telephone, or e-mail, become aware of and take into consideration existing limitations.

This consent's goal is to make sure that patients are informed about the limitations and specificities inherent in telebehavioral health interventions. It is recommended that they discuss the intervention details with the psychologist providing the services. Evidence suggests that compared to in-person interventions, videoconference, telephone, and e-mail are inherently different means of intervention delivery.

The goal of this document is not to discuss specificities inherent in telebehavioral services. The main goal is just to alert patients of their existence, and to make them aware of general differences and questions associated with them. For in-depth discussion and recommendations about telebehavioral health services, patients are encouraged to consult best practices, such as the 21/CEOPP/2015 from the Ordem dos Psicólogos Portugueses.

Therefore:

When telebehavioral health services with a patient are initiated, the patient authorizes these services and acknowledges that:

- The psychologist will conduct psychological services under circumstances that are not ideal for psychological intervention.
 - The results of telebehavioral health interventions in the scientific literature have been positive, however, we cannot prove that the results are identical to face-to-face intervention.
 - The psychologist's responsibility is exactly the same as through face-to-face intervention, being under the same code of ethics and deontology. There should be a physical address, as well as a way to identify the psychologist's professional identity and license number.
 - Telebehavioral health intervention must be used when there is a clear need for it, related to a problem or situation that prevents face-to-face intervention.
 - The discussion and choice of communication means designed for the specific psychological intervention performed remotely must be done collaboratively between the patient and psychologist, having the reasons that motivated the choice(s) and inherent limitations been discussed.
 - The patient is aware of issues related to privacy. The psychologist has no way to guarantee absolute privacy through telebehavioral health services.
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I, Flavio Rose Epstein, psychologist, member of the Ordem dos Psicólogos Portugueses, license number 23475, confirm that I adequately informed my patient Mr./Mrs./Ms. _____ about issues and limitations associated with telebehavioral health intervention compared to face-to-face intervention, including those related to privacy. I answered all patient questions to the best of my ability.

Psychologist's name: _____

Psychologist's signature: _____

I, _____, the patient, understood all issues discussed and I declare that I choose and accept to have telebehavioral health services. I had the opportunity to ask questions and I received appropriate answers to all of them. I, therefore, choose to sign this informed consent.

Patient's name: _____

Patient's signature: _____

_____ (place), ____/____/____