



I hereby consent to participate in tele mental health/online counseling through Rambler Mental Health. I understand that services provided through the Rambler Mental Health platform are done through HIPAA complaint video sessions.

I understand the following with respect to tele mental health/online counseling services:

- 1) I understand that I have the right to withdraw this consent at any time by informing Rambler Mental Health in writing.
- 2) I understand that there may be risks associated with utilizing his platform for my mental health needs, including but not limited to, technology failures, and limited ability to respond to emergencies.
- 3) I understand that there will be no recording of any of the online sessions by either party. All information disclosed within sessions and written records pertaining to those sessions are confidential and may not be disclosed to anyone without written authorization, except where required by law.
- 4) I understand that the privacy laws that protect the confidentiality of my protected health information (PHI) also apply to services on the platform unless an exception to confidentiality applies (i.e. mandatory reporting of child, elder, or vulnerable adult abuse; danger to self or others; mental/emotional health as an issue in a legal proceeding).
- 5) I understand that if I am having suicidal or homicidal thoughts, actively experiencing psychotic symptoms or experiencing a mental health crisis that cannot be resolved remotely, it may be determined that these services are not appropriate and a higher level of care is required.
- 6) I understand that during a tele mental health/online counseling session, we could encounter technical difficulties resulting in service interruptions. If this occurs, end and restart the session. If we are unable to reconnect within ten minutes, we will reach out to reschedule.
- 7) I understand that my therapist may need to contact my emergency contact and/or appropriate authorities should an emergency arise.
- 8) I understand that notes from my sessions may be kept in a HIPAA compliant electronic medical record and stored by the platform for time frames required by law and to help ensure continuity of quality care.

Emergency Protocols: You agree to inform your therapist at Rambler Mental Health of the address where you are at the beginning of each session.

For your safety and best practice, we may also ask for a contact person who we may contact on your behalf in a life-threatening emergency only.

Your signature indicates that understand the information contained in this form and all your questions have been answered to your satisfaction.