



Marla Christensen MA MFT NCC
Wellspring Individual, Couples, and Family Therapy
18650 SW Boones Ferry Road, Suite 3, Tualatin, Oregon 97062
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Informed Consent for Telehealth Services

I understand that Telehealth is an electronic information and communication technology used by a Mental Health provider to deliver services to an individual when he/she is located at a different site than the provider. And I hereby consent to Marla Christensen MA MFT NCC providing counseling services to me via Telehealth. Applications may include: FaceTime, videoconferencing, text messages, email, or any other electronic means. Accordingly, my private health information may be transmitted from my Therapist's mobile device to my own or from my device to that of my Therapist.

I understand that the laws that protect privacy and the confidentiality of medical information also apply to Telehealth. As always, your insurance carrier will have access to your records if records are submitted for reimbursement. I understand that I have the right to withhold or withdraw my consent to the use of Telehealth in the course of my care at any time, without affecting my right to future care or treatment. I may revoke my consent orally or in writing at any time by contacting Marla Christensen MA MFT NCC at 18650 SW Boones Ferry Road, Tualatin, Oregon 97062, telephone 503-850-4455. As long as this consent is in force (has not been revoked) Marla Christensen MA MFT NCC may provide counseling services to me via telehealth without the need for me to sign another consent form.

Client's Signature

Date

Client's Signature

Date

Therapists Signature

Date