

Communication Addendum to the Informed Consent Agreement

Secure and private communication cannot be fully assured utilizing cell/smart phone or regulated email technologies. It is the client's right to determine whether communication using non-secure technologies may be permitted and under what circumstances. Use of any non-secure technologies to contact Elaine Barron, LMSW will be considered to imply consent to return messages to client via the same non-secure technology, pending further clarification from client. Please check below which modes of communication are permitted and which are not permitted. This consent may be altered at any time should circumstances or preferences change.

In the event that client chooses not to allow non-secure modes of communication, contact will only be made via wire to wire phone, wire to wire fax, or mail.

Voice communication to client's cell/smart phone for:

Scheduling appointments	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Appointment reminders	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Between session contact	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted

Voice communication from Elaine Barron's cell/smart phone for:

Scheduling appointments	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Appointment reminders	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Between session contact	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted

Fax communication client's non-secure fax or E-fax for:

Scheduling appointments	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Appointment reminders	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Between session contact	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted

If permitted, list permitted fax number(s): _____

Text communication to client's cell/smart phone for:

Scheduling appointments	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Appointment reminders	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted
Between session contact	<input type="checkbox"/> Permitted	<input type="checkbox"/> Not Permitted

Text communication from Elaine Barron's cell/smart phone

Scheduling appointments	__ Permitted	__ Not Permitted
Appointment reminders	__ Permitted	__ Not Permitted
Between session contact	__ Permitted	__ Not Permitted

Contact via the client's email

Scheduling appointments	__ Permitted	__ Not Permitted
Appointment reminders	__ Permitted	__ Not Permitted
Between session contact	__ Permitted	__ Not Permitted

If permitted, list permitted email address(es): _____

Statement of Validation

I have read this Statement of Services, it has been adequately explained to me, and I understand its contents.

By Client(s)

_____	_____	_____
Print Name Here	Sign Here	Date
_____	_____	_____
Print Name Here	Sign Here	Date
_____	_____	_____
Print Name Here	Sign Here	Date
_____	_____	_____
Print Name Here	Sign Here	Date

By Elaine Barron, LMSW

_____	_____	_____
Print Name Here	Signature	Date

