



KATHI SCHOLZ, LPC, NCC
10400 Eaton Place, Suite 200
Fairfax, VA 22030
703.591.5912 ext 8
kathischolz51@gmail.com
NPI 1194082255 EIN 46-1511418

Consent to Videoconferencing and Teletherapy

During this Covid-19 pandemic, I am holding sessions via video or telephone. There will be no in-office sessions. Please read the consent below and sign.

- Location: Please consider your location during any phone or videoconferencing meetings to reduce distraction and protect your privacy. You should also be aware of potential security issues with your computer. I will be using a HIPAA compliant platform, Doxy.me (unless we have technical issues with this site) and will be hosting sessions from my home in a secure and private setting.
- Emergency: if you require crisis assistance, you will need to access care in your area. Please call 911 or go to the nearest emergency room.
- Records: I will continue to document and retain records of our meetings. Recording of video sessions is prohibited by both parties.
- Reporting Requirements: All mandated reporting requirements regarding Child, Elder, and Dependent Abuse, as well as Suicidal and Homicidal Risk are still in effect.
- Fees: Please continue to pay by our agreed upon type of payment. If paying by check, I will give you an address where checks can be mailed.

I have read and agree with this consent form:

Printed name of client Date

Signature of client Date

Printed name of client Date

Signature of client(s) Date

