### ONLINE COUNSELING CONSENT

Online therapy is conducted using interactive audio, video, email or a combination thereof. In many cases, online therapy benefits a client as well as sessions conducted in person, but results cannot be guaranteed. Online services are not appropriate for all clients and situations. If, at any point, the therapist does not recommend online therapy, every effort will be made to offer an office appointment or referral.

## **Security**

Clients are entitled to confidentiality and best efforts will be made by the therapist to maintain this right during online therapy. However, transmitting personal information via the Internet (including email) or phone should be done with discretion, as security cannot be guaranteed.

#### Limitations

Online therapy is intended to provide quality information and assistance with psychological issues and present problems. It may, however, not be the best option for indepth psychotherapy and more intensive techniques, such as EMDR for trauma.

# When should I seek traditional therapy rather than online therapy?

- 1. If you are having thoughts of harming yourself or someone else, or psychotic symptoms (e.g., hallucinations). In the case of harm to self or others, please call **911** or **1-800-SUICIDE** (National Suicide Hotline).
- 2. If you are in an abusive or violent relationship.
- 3. If you are experiencing severe depression.
- 4. If you struggle with significant substance abuse dependence.

## **Technical Difficulties/Service Disruption**

It should be understood that, when communicating by Internet or other electronic means, disruption of service or other technical difficulties are likely to occur from time to time. Sessions will be completed in the time designated, if the problem can be corrected. If it cannot be corrected, the session will be rescheduled. If a disruption occurs at the time of crisis, the patient is responsible for contacting the counselor immediately by phone at **(602) 540-6272** or dialing **911**.

By signing, I attest that:

- 1. I have read and understand the policies and limitations related to online counseling and agree to participate.
- 2. I reside in the state of Arizona.
- 3. I am aware of my right to withdraw consent for online therapy at any time.

Client Signature	Date
Parent/Guardian Signature	 
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Janet Kartler, MA, LPC - Therapist	Date