



CONSENT TO TELEHEALTH

PATIENT CONSENT TO TELEHEALTH

There are some conditions that may delay or prevent Carrousel Therapy Center Corporation from connecting to the patient, One of them is the connection being used by the patient/parent/guardian.

These are also other conditions or considerations:

1. Children (minors 17 or less as State Laws requires) must be accompanied by a Parent/Caregiver.
2. HIPAA compliance connections - protect your PII (private identifying information) and HOI (health protect information).
3. You can not be in public places and no persons around the patient/parent.
4. The Law included in Telehealth allows to be compliance on both sides, the doctor and the patient.
5. We can not do Telehealth trough WhatsApp, Facebook or faceTime.

CLIENT CONSENT

I, _____ adult and responsible for my self. Attest that I accept the terms and conditions to this Telehealth visit.

PARENT/GUARDIAN CONSENT

I, _____ adult and responsible as a Parent/Guardian. Attest that I accept the terms and conditions to this Telehealth visit.

CLIENT/PARENT/GUARDIAN SIGNATURES

Client signature.

Date

Parent/Guardian Signature

Date

Please understand that if there is a delay, it may be due to several other conditions we can not anticipated.

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