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Email and Text (SMS) Messaging Informed Consent: In order to communicate with you by email or text message, I need to make sure you are aware of the confidentiality and other issues that arise when we communicate this way and to document that you are aware of these and agree to them. I use a service called MDOfficeMail that encrypts email messages to protect your private information (https://mdofficemail.com/How_It_Works_.html). The first time you receive an email from me, you will need to create login credentials to view the message and respond with their secure message system.

I understand that e-mail messages are sent over the Internet and are not encrypted, are not secure, and may be read by others. I understand that my e-mail communications with my therapist may NOT be encrypted and, therefore, my therapist cannot guarantee the confidentiality and security of any information I send to him or that he sends to me via e-mail. I understand that SMS messages are even less secure than e-mail, and the same conditions apply.

I understand that for this reason my therapist has advised me not to send sensitive information via e- mail or SMS message. This includes information about current or past symptoms, conditions, or treatment, as well as identifying information such as social security numbers or insurance identification information.

I hereby give permission for my therapist to reply to my messages via e-mail, including any information that she deems appropriate, that would otherwise be considered confidential. I agree that Amy DiGennaro shall not be liable for any breach of confidentiality that may result from this use of e-mail via the Internet.

I understand that my therapist will limit SMS messages to brief inquiries or responses regarding scheduling. I understand that my therapist may at times e-mail me information about resources that I can use as part of my treatment. I hereby consent to receive such information via e-mail.

I understand that e-mail and SMS communication should not be used for urgent or sensitive matters since technical or other factors may prevent a timely answer. I understand that if I use email or SMS to make or request scheduling changes it is my responsibility to confirm that my therapist has received my communication more than 24 hours before the appointment time being changed. If I believe I need a response within 48 hours, I will not use e-mail but will call my therapist. If I do not receive an answer to a routine e-mail or text message within two working days, I understand that I should call my therapist.

I understand that all e-mail and SMS communications may be made part of my permanent medical record and would be accessible anyone given access to those records. I also understand that I may withdraw permission for my therapist to communicate with me via e-mail or SMS by notifying my therapist in writing.

_____ Date: _____
Signature of person seeking therapeutic consultation

_____ Date: _____
Amy P. DiGennaro, MFA, MA, AT, Therapeutic Consultant

_____ Date: _____
Signature if Guardian or responsible adult (if under eighteen years of age)

Relationship: _____