

PRIMACARE, LLC
INFORMED CONSENT FOR IN-PERSON SERVICES DURING
COVID-19 PUBLIC HEALTH CRISIS

This document contains important information about our decision (yours and mine) to resume in-person services in light of the COVID-19 public health crisis. Please read this carefully and let me know if you have any questions. When you sign this document, it will be an official agreement between us.

Decision to Meet Face-to-Face

We have agreed to meet in person for some or all future sessions. If there is a resurgence of the pandemic or if other health concerns arise, however, I may require that we meet via telehealth. If you have concerns about meeting through telehealth, we will talk about it first and try to address any issues. You understand that, if I believe it is necessary, I may determine that we return to telehealth for everyone's well-being.

If you decide at any time that you would feel safer staying with, or returning to, telehealth services, I will respect that decision, as long as it is feasible and clinically appropriate. Reimbursement for telehealth services, however, is also determined by the insurance companies and applicable law, so that is an issue we may also need to discuss.

Risks of Opting for In-Person Services

You understand that by coming to the office, you are assuming the risk of exposure to the coronavirus (or other public health risk). This risk may increase if you travel by public transportation, cab, or ridesharing service.

Your Responsibility to Minimize Your Exposure

To obtain services in person, you agree to take certain precautions which will help keep everyone (you, me, and our families, Primacare staff and other patients) safer from exposure, sickness and possible death. If you do not adhere to these safeguards, it may result in our starting / returning to a telehealth arrangement.

- Keep in-person appointments only when symptom free.
- Please wait in your car or outside until you receive a phone call or text to come into the office.
- The waiting room is set up for safe distancing-please abide by the signs on the chairs.
- Masks are requested in common areas.
- Keeping a safe distance of 6 feet will be required at all times.
- If you are bringing a child, make sure that the child follows all of these sanitation and distancing protocols.
- If you have had any exposure to anyone in the past 14 days that is infected, please do not schedule an in-person meeting.
- Please try not to touch your face or eyes with your hands. If you do, you will immediately wash or sanitize your hands.
- You may be asked to have your temperature taken.
- Please take steps between appointments to minimize your exposure to COVID.
- If you have a job that exposes you to other people who are infected, you will immediately let me or Primacare staff know.

- If your commute or other responsibilities or activities put you in close contact with others (beyond your family), you will let me or Primacare staff know.
- If someone in your home tests positive for the infection, you will immediately let me or Primacare staff know and we will then [begin] resume treatment via telehealth.
- If you have travelled internationally or domestically within the past 14 days.

The above precautions may change if additional local, state or federal orders or guidelines are published. If that happens, we will talk about any necessary changes.

My Commitment to Minimize Exposure

Primacare has taken steps to reduce the risk of spreading the coronavirus within the office and we have posted our efforts on our website and in the office. Please let me know if you have questions about these efforts.

If You or I Are Sick

You understand that I am committed to keeping you, me, Primacare staff and all of our families safe from the spread of this virus. If you show up for an appointment and I or office staff believe that you have a fever or other symptoms, or believe you have been exposed, I will have to require you to leave the office immediately. We can follow up with services by telehealth as appropriate.

If I or any Primacare staff test positive for the coronavirus, I will notify you so that you can take appropriate precautions.

Your Confidentiality in the Case of Infection

If you have tested positive for the coronavirus, I may be required to notify local health authorities that you have been in the office. If I have to report this, I will only provide the minimum information necessary for their data collection and will not go into any details about the reason(s) for our visits. By signing this form, you are agreeing that I may do so without an additional signed release.

Informed Consent

This agreement supplements the general informed consent that we agreed to at the start of treatment.

Your signature below shows that you agree to these terms and conditions.

Patient/Parent/Legal Guardian

Date

Therapist

Date

Thank you. These guidelines follow the State of Michigan precautions.