

# COVID 19 Provider Consent and Scripting Guidelines

## Ambulatory Services 4/21/2020

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UPDATED 4/12/20

This information was created in response to the COVID19 Public Health Epidemic (PHE) and is accurate for services provided during this PHE only. Regulations are changing rapidly and there may be a lag between changes and updates to this guidance. Please consult your compliance team if you have any questions.

**Definition: Telehealth/Telemedicine** An interactive audio and video system that permits real-time communication between the provider and patient.

**Definition: Phone Calls** do not require face to face video connection. They are verbal two-way communication with the patient.

### There are 2 consents required for an Ambulatory Visit:

1. **Ambulatory consent for care** – This is an annual consent typically performed by registration or completed by the family via MyChart. If this has not been done, the appointment will appear yellow on your CIS schedule. It is at the discretion of the provider whether or not to continue with the visit as scheduled as the visit may be medically necessary. The clinic staff should email [FCSeniorRegistrationTeam@seattlechildrens.org](mailto:FCSeniorRegistrationTeam@seattlechildrens.org) to confirm that the visit will proceed or if a reschedule is desired.
2. **Consent for a Telehealth/Telemedicine or Phone visit** – The provider should obtain consent at the beginning of the appointment for that clinic visit to occur using telehealth technology or via the phone. This is currently not available via MyChart. Scripting is below.

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### Provider Opening Questions and Scripting for *Telehealth/Telemedicine* Visits:

At the beginning of every *video* visit, the provider is required to ask the following questions:

1. What phone number should I call if we get disconnected? What number should I call if there is an emergency and I need to get help for you?
2. Are you in a location where you are comfortable discussing your healthcare? [Yes/No/Unknown]
3. (especially for new patients) Please show me picture ID (for parent of patient), and here is my ID.
4. What state are you located in right now? (for non-pandemic scenarios you are only allowed to practice telehealth in those states where you have a license)

At the beginning of every *video* visit, the provider is required to obtain consent (suggested script):

You have chosen to receive care through the use of telemedicine. Telemedicine enables health care providers at different locations to provide safe, effective, and convenient care through the use of technology. As with any health care service, there are risks associated with the use of telemedicine, including equipment failure, poor image resolution, and information security issues. Additionally, telemedicine risks include not having an in-person physical exam, being unable to get vital signs, or being unable to administer standard ratings scales/testing.

- Do you understand the risks and benefits of telemedicine as I have explained them to you? [Yes/No/Unknown]. (If answer is No, discuss the risks above and how telemedicine is not advantageous for acute illness, emergencies, any medical procedure or exam requiring hands-on ability. The result of the telemedicine visit actually may be to recommend the patient being seen in person. The benefits are eliminating travel, usually appointments scheduled sooner).
- Do you consent to the use of telemedicine for this visit? [Yes/No/Unknown] - (This emphasizes that there is always an option to be seen in-person and not virtually.)

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### Provider Opening Questions and Scripting for *Phone* Visits:

At the beginning of every *phone* visit, the provider is required to ask the following questions:

1. What alternate phone number should I call if we get disconnected? What number should I call if there is an emergency and I need to get help for you?
2. Are you in a location where you are comfortable discussing your healthcare? [Yes/No/Unknown]
3. Who is participating in this call today?

At the beginning of every *phone* visit, the provider is required to obtain consent (suggested script):

You have chosen to receive care through the use of phone. Phone visits enable health care providers at different locations to provide safe, effective, and convenient care through the use of technology. As with any health care service, there are risks associated with the use of the phone, including equipment failure, poor connection/audio, and information security issues. Additionally, phone visit risks include not having an in-person physical exam, being unable to get vital signs, or being unable to administer standard ratings scales/testing.

- Do you understand the risks and benefits of a phone visit as I have explained them to you? [Yes/No/Unknown]. (If answer is No, discuss the risks above and how the phone is not advantageous for acute illness, emergencies, any medical procedure or exam requiring hands-on ability. The result of the phone visit actually may be to recommend the patient being seen in person. The benefits are eliminating travel, usually appointments scheduled sooner).
- Do you consent to the use of the phone for this visit? [Yes/No/Unknown] - (This emphasizes that there is always an option to be seen in-person and not virtually).