

**INFORMED CONSENT FOR IN-PERSON SERVICES DURING COVID 19 PUBLIC HEALTH CRISIS**

Patient Name: \_\_\_\_\_

Patient's Date of Birth: \_\_\_\_\_

**Return to [admin@barnesandklatt.com](mailto:admin@barnesandklatt.com) or via fax to 847-981-9322**

**Please initial each line below and sign at the bottom.**

- \_\_\_\_\_ 1. I understand that Barnes & Klatt cannot eliminate the risk of COVID19 for in-person services, and I /we are comfortable assuming the inherent risk of exposure to COVID19 associated with in-person services.
- \_\_\_\_\_ 2. I understand that I/we have the option to postpone the session without cost or penalty and that doing so will not affect the quality of my clinical care. I understand that if I have a fever, I am ill, I have been exposed to or diagnosed with Covid19 that I will notify my clinician and arrange a telehealth session as appropriate.
- \_\_\_\_\_ 3. I understand that only 1 parent/guardian is permitted to accompany minors to the session to promote social distancing in our waiting room. Patients are asked to wait in their car or the lobby until no earlier than 5 minutes before their appointment time. Your clinician will discuss with you how to accommodate for a session requiring more than one person, for example family sessions.
- \_\_\_\_\_ 4. I understand that all parents and patients are required to wear masks/face covering while reporting to visiting Barnes & Klatt and sitting in the waiting room. During sessions, if at least six feet of physical distance between people can be maintained then face coverings may be optional.
- \_\_\_\_\_ 5. I understand that Barnes & Klatt advises patients with chronic health conditions and patients living with family members who have chronic health conditions to postpone in-person treatment except in emergent cases.
- \_\_\_\_\_ 6. I have had the opportunity to ask all questions pertaining to postponing the treatment and regarding the provision of in person services, and that, should questions or changes arise, I speak with my clinician via phone or telehealth platforms.

**Please know that Barnes & Klatt is taking the following precautions to protect our patients and help slow the spread of Covid19**

- Patients' temperatures will be taken. Those with temperatures at or above 100.5 will be rescheduled or offered telehealth.
- Office seating has been arranged to promote social distancing.
- Staff wear masks and maintain social distancing.
- Everyone is encouraged to wash their hands after using the restroom and hand sanitizer is available for use.
- Appointment times are staggered to minimize the number of people in the waiting room.
- Physical contact is not permitted.
- Tissues and trash receptacles are readily available.
- Common areas are disinfected throughout the day.

**This agreement supplements the general informed consent/business agreement between me and Barnes & Klatt.**

Patient Signature \_\_\_\_\_

Date \_\_\_\_\_

Patient's Guardian (if younger than 18): \_\_\_\_\_

Date \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_