
After Scheduling Compliance Checklist

Checklist

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Parent Information Questionnaire

Parent Information Questionnaire

Review Only – No Acknowledgment Required

Confidentiality and Its Limits

Neuropsychological Evaluation Process Overview

Office and Directions

Signed Acknowledgment and/or Consents

Communication Preferences and Consent

Consent for Telehealth Services

Consent for Your Child's Evaluation and Treatment for Under 13

Custody and Legal Decision-Making Information

Emergency and Crisis Information for Families

Emergency Contact and Limited Emergency Information Release

HIPAA Notice of Privacy Practices

Informed Consent for Pediatric Neuropsychological Evaluation Under 13

Language and Communication Preferences

Notice of Privacy Practices

Patient Bill of Rights

Respect and Inclusion Policy

Social Media Online Communication Guidelines

Your Rights and Responsibilities as a Client

Zoom Visit Preparation Guide for Families