

After Scheduling Compliance Checklist (13-17)

Checklist

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Parent Information Questionnaire

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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 Evaluation and Treatment (13-17)
- 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 (13-17)
- 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