

Zoom Preparation Guide for Parents

We look forward to working with you and your child and supporting their well-being. Your child's upcoming virtual appointment with our team is an important step toward that goal.

This tip sheet is designed to help you and your child prepare, set up your space, and understand what to expect—so that the session can be as safe, smooth, and effective as possible. Please review the checklist and tips below before your child's upcoming virtual visit.

Technology & Zoom Setup

- **Use the Zoom Link Provided**
Please use the Zoom link we send you. Keep it accessible and do not share it with others.
- **Install Zoom in Advance**
Download Zoom from <https://zoom.us/download> and make sure it is installed on your device (computer, tablet, or phone).
- **Test Your Device**
Ensure your device runs Zoom smoothly. Older or slower devices may experience audio or video issues.
- **Update Zoom**
Use the latest version of Zoom to avoid connection or feature issues.
- **Check Your Internet Connection**
A stable Wi-Fi or wired connection is essential. Confirm you have good signal strength.
- **Use a Computer if Available**
A laptop or desktop is preferred for better video and audio quality.
- **Power Source**
Make sure your device is fully charged or plugged in during the session.
- **Display Your Name Clearly**
Confirm that your Zoom display name reflects your and your child's names so we can identify you correctly.

Audio & Microphone Setup

- **Test Your Microphone**
Use Zoom's audio test feature to confirm that your microphone is working.
- **Minimize Background Noise**
Mute other devices and consider using headphones with a built-in microphone for clarity.
- **Position the Microphone Correctly**
Keep the microphone close enough to capture your voice clearly.

Camera Setup

- **Camera Must Be On Unless We Agree Otherwise in Advance**
We need to be able to see you and your child throughout the session.
- **Camera at Eye Level**
Position the camera so that you and your child are looking straight ahead, not up or down.
- **Sit at the Right Distance**
Sit about 2–3 feet (arm's length) from the camera.
- **Good Lighting**
Avoid bright lights or windows behind you or your child.

Environment Setup

- **Private, Confidential Space**
Choose a quiet room where you and your child can speak freely without being overheard.
- **Minimize Distractions**
 - Clear away toys, books, and devices not needed for the session.
 - Ask siblings or other family members not to interrupt.
 - Keep pets out of the session area if possible.
 - Use a room with a door that can be closed.
- **Close Other Apps & Tabs**
Close all unnecessary programs to keep the connection stable.
- **Comfort Items**
Your child may have a small comfort object (e.g., stuffed animal or fidget) if it is not distracting.

General Preparedness

Younger Children (12 and under)

- Explain what to expect in an age-appropriate way.
- Reassure them that we are here to help, not to judge or punish.
- Let them know it's okay to share feelings, even difficult ones.
- Make sure they are awake, dressed, and ready to participate.

Parents and Older Children (13+)

- Have a pen and paper ready for notes.
- Send in all paperwork (e.g., intake or consent forms) before the session.
- Prepare and bring any questions you'd like us to address.

General Session Conduct

- **No Recording**
Do not record any part of the session. This protects privacy and complies with ethical standards.
- **Respect the Process**
Treat the virtual session as you would an in-person appointment.
- **Do Not Join While Driving**
Sessions cannot occur in a car or moving vehicle for safety and quality-of-care reasons.
- **Be On Time**
Log in 5–10 minutes early to check audio and video. Contact us immediately using the agreed-upon backup method (typically our office phone number) if you experience issues.

Participation Guidelines

Participation will vary depending on your child's age and the purpose of the visit.

Parents of Children

- **Interview Session:** Join most or all of the session to provide background information.
- **Feedback Session:** Join most or all of the session to review findings.

Older Children (13+)

- Participate in most or all of both the interview and feedback sessions to share input and hear results.

Younger Children (12 and under)

- **Interview Session:** Join part of the session to provide background information.
- **Feedback Session:** May join part of the session (depending on age and parent permission) to hear results in an age-appropriate way.

Safety Guidelines for Virtual Sessions

Location Requirement

Before each session, parents must provide the current physical location (address or identifiable details) for both themselves and their child. For older children (13+), the child must confirm their location directly.

Emergency & Backup Contact Information

- Provide a reachable emergency contact (name and phone number).
- Provide a backup phone number where you can be reached during the session.
- For older children (13+), please ensure both the child and parent have a reliable phone number and emergency contact available.

If Zoom Disconnects

Try to reconnect immediately. If reconnection fails, contact our office using the agreed-upon backup method (typically our office phone number).

Crisis Instructions

If a crisis arises during or outside the session:

- Call 911 (or go to the nearest emergency room). You may also call 211 for local crisis resources.
- Call or text 988 for the National Suicide & Crisis Lifeline.
- Text "HOME" to 741741 for free, confidential support.
- Go to the nearest emergency room.

If we determine during the session that your child may be in crisis or at risk:

- The session may be paused or ended early for safety.
- We may contact a parent/guardian, your designated emergency contact, or emergency services if there is serious risk of harm to self or others.
- We will follow all ethical and legal guidelines, communicate clearly about any actions taken (unless doing so would increase risk), and provide appropriate referrals or resources.

Parent Availability (When Not Present in the Room)

If your child is seen alone for part or all of the session:

- A parent or guardian must remain nearby and reachable (e.g., in another room with phone access).
- Ensure your child knows how to reach you if needed.

Other Helpful Tips

- **Behavioral, Emotional, or Communication Concerns**
If your child has any challenges that may affect the session, please let us know beforehand. This allows us to plan for a safe and productive experience.
- **Plan Transition Time After the Visit**
Avoid scheduling stressful activities immediately after. Give your child 10–15 minutes to decompress.
- **Mute When Not Speaking**
If multiple people are attending (e.g., during a feedback session), please mute your microphone when others are speaking to reduce background noise.

Final Pre-Visit Checklist

- Zoom installed and tested
- Camera and microphone working
- Device fully charged or plugged in
- Well-lit, quiet, and private space
- Distractions minimized
- Trusted adult nearby if needed
- Emergency contact and backup method shared with us
- Crisis plan understood
- All forms completed

- Safety procedures reviewed
- No recording of the session

Please Contact Us Before the Visit If You Have Questions About

- Technology setup
- Child comfort or cooperation
- Emergency or safety procedures
- Privacy concerns
- What to expect during the session
- Who should be present

Electronic Signatures and Records

By signing this form electronically, I agree that my electronic signature and any related electronic records shall have the same legal validity and enforceability as a handwritten signature and paper documents. I acknowledge and consent to the use of electronic records for this agreement.

Acknowledgment of Receipt and Review (for Minors or Individuals Lacking Legal Capacity)

I acknowledge that I have received, read, and understood the Tips for Zoom Session of Pediatric Neuropsychology Associates PLLC. I understand that this document is provided for informational purposes and does not require my consent for services.

By signing below, I confirm that I am the parent or legal guardian of the patient named below and that I have the legal authority to receive and acknowledge this information on the patient's behalf.

I understand that I am not required to sign this acknowledgment. If I choose not to sign, the practice will document that the document was provided to me.

Printed Name of Patient: _____

Printed Name of Legal Representative: _____

Signature of Legal Representative: _____

Relationship to Patient: _____

Date: _____

A copy of this signed consent will be retained in the patient's health records.

For Office Use Only

Date Received: _____

Received By: _____

Staff Role: _____

Filing Method: Paper File Digital File Both

Notes: _____