

DESIGNED HEALTH OPTIONS LLC

CLIENT CONSENT FOR FACE-TO-FACE VISIT

In view of the current COVID restrictions issued by the state government of New Mexico, we prefer not to offer face-to-face visits to protect both the staff and our clientele. However, we have been requested to provide face-to-face services by some clients who prefer to have a face-to-face visit with the provider of services.

While we agree with clients as to the higher satisfaction and efficacy of a face-to-face visit, AND can accommodate this preference on the part of the client (as long as there are staff that are willing to meet in this manner) - we are happy to provide this service under the following guidelines:

1. Clients **MUST** wear a mask in common shared areas so as not to expose other clients or staff that are not seeing the client on that visit.
2. The client must demonstrate his or her acceptance - of the knowledge that a physical examination will be taking place - and awareness that the proximity of this activity clearly compromises the “social distancing” rule.

YOUR SIGNATURE BELOW INDICATES YOUR:

3. **Awareness and acceptance** of the potential risk implied by the avoidance of 6’ minimal separation,
4. **Acknowledgement** of the potential risk of that avoidance, and
5. **Agreement** to hold Designed Health Options LLC, its designees, the provider of services, and corporate entity free of responsibility from these actions.

Contact information in the event of a question:

Trish Dawson JD, Esq
c/o Designed Health Options, LLC
P. O. Box 2480
Corrales, New Mexico 87048
ask@designedhealthoptions.com

My signature below indicates that I have been given an opportunity to ask questions and have had them answered to my satisfaction. I have been made aware that a telehealth appointment may be made in lieu of a face-to-face visit.

Printed Name: _____

Signature: _____ Date: _____

___ Check here if you would like a pdf sent to your email of:
