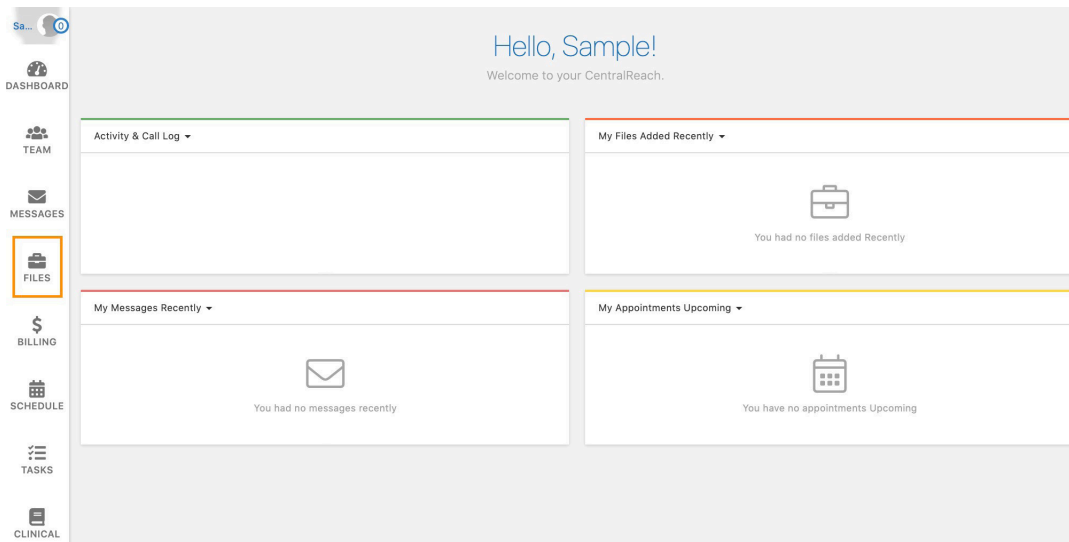


Cómo Firmar un Acuerdo de Servicios del Cliente Usando (BAE Telehealth Consent Form)

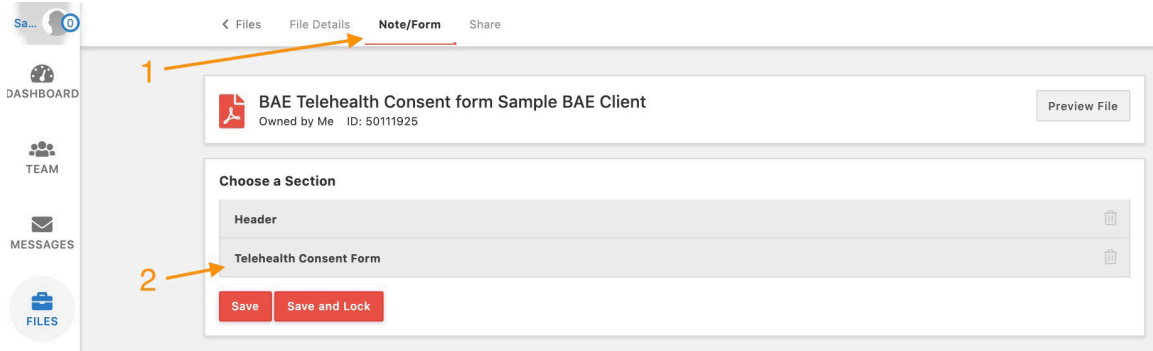
1. Abra un navegador de internet y vaya a <https://members.centralreach.com> e inicie sesión con su nombre de usuario y contraseña.
2. Haga clic en el icono de “Files” (Archivos) de la izquierda.



3. Haga clic en el “BAE Telehealth Consent Form” (Acuerdo de Servicios del Cliente).

Type	Id	File Name	Size	Uploaded By	Owned By	Added
	50111925	New BAE Telehealth Consent form Sample BAE Client	51.23 KB	Withheld	S. BAE Client	03/31/2020

4. Primero haga clic en la pestaña “Note/Form” (Nota/Formulario). Segundo clic en la sección “BAE Telehealth Consent Form” (Acuerdo de Servicios del Cliente).

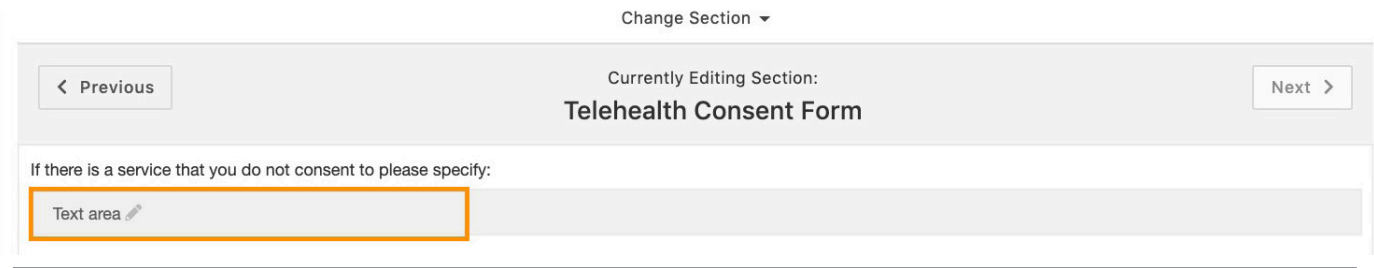


5. Haga clic en “Nombre del padre” y escriba su nombre.

Client Date of Birth: 01/01/1900

1. I. authorize Behavior and Education to allow me/the patient to participate in a Telehealth (videoconferencing) service with Behavior and Education supervisory, RBT, and behavior therapists.


6. Por favor, lea la lista de consentimiento. Si hay algo que no consiente, enumere lo hace aquí.




Change Section ▾

< Previous Currently Editing Section: **Telehealth Consent Form** Next >

If there is a service that you do not consent to please specify:

Text area 

7. Primero haga clic en el “text area” (área de texto) de bajo de Nombre de impresión y escriba su nombre. Segundo, clic en el icono “Pen” (pluma para colocar su firma.



Client/Relative/Guardian Signature:*

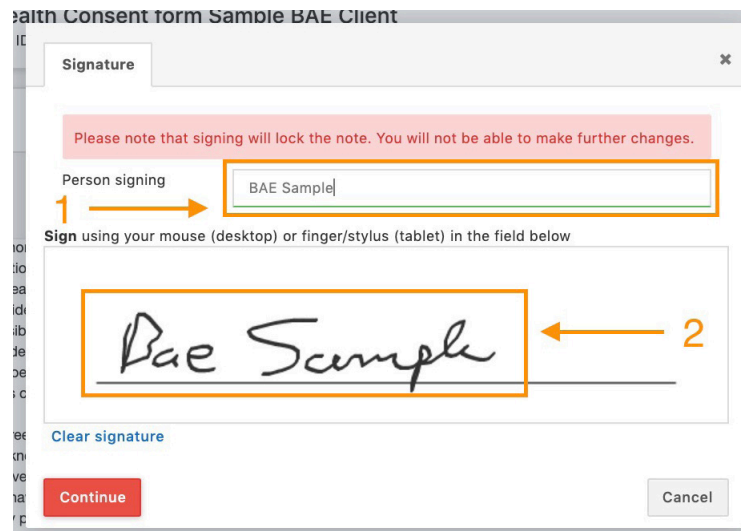
Print Name:

Text area 

Signature:

Sample BAE Client

8. Primero ingrese su nombre en el cuadro “Person Signing Box” (Firma de persona). Segundo escriba su firma en la ventana de abajo.



Health Consent form Sample BAE Client

Signature

Please note that signing will lock the note. You will not be able to make further changes.

Person signing: BAE Sample

1 →

Sign using your mouse (desktop) or finger/stylus (tablet) in the field below

Bae Sample

← 2

Clear signature

Continue Cancel

9. Finalmente haga clic en “Save and Lock” (Guardar y bloquear).

* The signature of the patient must be obtained unless the patient is a minor unable to give consent or otherwise lacks capacity.

I hereby certify that I have explained the nature, purpose, benefits, risks of, and alternatives to (including no treatment) the proposed procedure, have offered to answer any questions and have fully answered all such questions. I believe that the patient/relative/guardian fully understands what I have explained and answered.

Save **Save and Lock** Auto saved.