AI Consent Form for Therapy

This template has a version for private practice, a version for counseling centers and agencies, and an Illinois addendum. Check the uses that apply, fill in the fields, and have your attorney or compliance officer review the form before you use it.

Consent for the Use of AI in Your Care

Practice _____ Therapist _____

Your therapist uses artificial intelligence (AI) tools to support some parts of your care. This form explains how, how your privacy is protected and what your choices are. Please ask about anything that is unclear.

How AI is used in your care

Your therapist has checked each use that applies:

- ☐ Planning sessions and treatment approaches, using information with your name and other identifying details removed
- ☐ Drafting progress notes from your therapist's own summaries, which your therapist reviews, edits and signs
- ☐ Preparing materials for you, such as handouts or practice exercises, which your therapist reviews first
- ☐ Practicing therapy skills with fictional clients, which uses no information about you
- ☐ Other use: _____

AI system or systems used

_____

How your privacy is protected

Your therapist enters your name and other identifying details only into AI systems covered by a business associate agreement, a contract that protects health information under HIPAA. In any other AI system, your therapist first removes your name and other details that could identify you. Your therapist does not use AI to provide therapy to you or to communicate with you.

Your therapist's role

Your therapist makes every decision about your care and reviews anything AI produces before it is used. AI does not diagnose you or decide your treatment.

Recording or transcribing sessions

Your therapist will not use an AI tool to record or transcribe your sessions unless you agree here. Please check one:

- [ ] I agree to the use of the following AI tool to record or transcribe my sessions to help prepare documentation: _____
- [ ] I do not agree to AI recording or transcription of my sessions.

Benefits and risks

AI can save time on planning and paperwork, so more of your therapist's attention goes to you. AI tools can make mistakes, which is why your therapist reviews everything they produce. Any technology carries some risk to privacy, which your therapist reduces with the safeguards above. If you prefer, your therapist will plan and document your care without AI tools.

Your choices

You may decline or withdraw this consent at any time by telling your therapist, and your decision will not affect your access to care. You can ask questions about AI use at any time.

Questions or concerns: contact

_____

Your consent

- [ ] I have read this form, my questions have been answered, and I agree to the uses of AI checked above.
- [ ] I do not agree to the use of AI in my care.

Signatures

Client or legal guardian name _____ Date _____

Client or legal guardian signature

_____

Therapist name _____ Date _____

Therapist signature

_____

Consent for the Use of AI in Your Care: Counseling Centers and Agencies

Organization _____ Clinician _____

Your clinician uses artificial intelligence (AI) tools that the organization has approved to support some parts of your care. This form explains how, how your privacy is protected and what your choices are. Please ask about anything that is unclear.

How AI is used in your care

Your clinician has checked each use that applies:

- ☐ Planning sessions and treatment approaches, using information with your name and other identifying details removed
- ☐ Drafting progress notes from your clinician's own summaries, which your clinician reviews, edits and signs
- ☐ Preparing materials for you, such as handouts or practice exercises, which your clinician reviews first
- ☐ Practicing therapy skills with fictional clients, which uses no information about you
- ☐ Other use: _____

AI systems the organization has approved for client information

_____

How your privacy is protected

The organization decides which AI systems may hold information that identifies you, and each of those systems is covered by a business associate agreement, a contract that protects health information under HIPAA. In any other AI system, your clinician first removes your name and other details that could identify you. Your clinician does not use AI to provide therapy to you or to communicate with you.

Your clinician's role

Your clinician makes every decision about your care and reviews anything AI produces before it is used. AI does not diagnose you or decide your treatment. If your clinician is a trainee, a licensed supervisor oversees their work, including their use of AI.

Recording or transcribing sessions

Your clinician will not use an AI tool to record or transcribe your sessions unless you agree here. Please check one:

- ☐ I agree to the use of the following AI tool to record or transcribe my sessions to help prepare documentation: _____
- ☐ I do not agree to AI recording or transcription of my sessions.

Benefits and risks

AI can save time on planning and paperwork, so more of your clinician's attention goes to you. AI tools can make mistakes, which is why your clinician reviews everything they produce. Any technology carries some risk to privacy, which your clinician reduces with the safeguards above. If you prefer, your clinician will plan and document your care without AI tools.

Your choices

You may decline or withdraw this consent at any time by telling your clinician, and your decision will not affect your access to care. You can ask questions about AI use at any time.

Questions or concerns: the organization's privacy officer or contact

Your consent

- [ ] I have read this form, my questions have been answered, and I agree to the uses of AI checked above.
- [ ] I do not agree to the use of AI in my care.

Signatures

Client or legal guardian name

Date

Client or legal guardian signature

Clinician name

Date

Clinician signature

Illinois Addendum: Notice and Consent for AI When Sessions Are Recorded or Transcribed

Illinois law, the Wellness and Oversight for Psychological Resources Act, requires written notice and your consent before a licensed professional uses artificial intelligence (AI) for supplementary support, such as preparing and maintaining your records, when your therapy session is recorded or transcribed. This addendum gives that notice and records your choice.

Licensed professional

Practice or organization

Notice

AI will be used for supplementary support in your care when your sessions are recorded or transcribed.

AI tool or system

Specific purpose of the AI tool or system

Your licensed professional keeps full responsibility for all interactions, outputs and data use associated with the AI tool. The AI tool does not make therapeutic decisions, communicate with you in therapy, generate treatment plans or recommendations without your professional's review and approval, or detect emotions or mental states.

Your consent

- ☐ I have read this notice, and I consent to the use of the AI tool named above for the purpose described.
- ☐ I do not consent.

This consent is separate from any other form or terms of use. You may revoke it at any time by telling your licensed professional, and your decision will not affect your access to care.

Signatures

Client or legally authorized representative name

Date

Client or legally authorized representative signature

Licensed professional name

Date

Licensed professional signature