

New AI Scribe Audio Consent

I consent to allow my therapist to securely record our therapy sessions for the purpose of documentation only. I understand that each audio recording will be used exclusively to generate a written summary of the session and will then be immediately deleted once the transcription is complete. The resulting clinical documentation will be securely stored in my client chart in compliance with privacy and confidentiality standards.

By signing below, I acknowledge that I have read and understood this consent, and I agree to the use of session recordings solely for documentation purposes.

Client Signature	
Date	