Montana Psychiatry, PLLC

3737 Grand Avenue, Suite 6
Billings, MT 59102
Phone (406) 839-2985 Fax (406) 839-2986

Release of Information

I hereby authorize: ☐ Montana Psychiatry, PLLC
☐ _____

To: ☐ Release information to:
☐ Obtain information from:
☐ Exchange information with:

Name:_____
Address:_____
_____
_____
Phone:_____

Specific Purpose for the use or disclosure:_____

The information requested or authorized for release or exchange may include:

- ☐ Psychiatric evaluation
- ☐ Progress notes
- ☐ Medical records/reports
- ☐ Psychological testing results
- ☐ Academic testing/School reports
- ☐ Laboratory tests
- ☐ Behavioral/Emotional Scales
- ☐ Treatment plans/summaries
- ☐ Other (specify)_____

This authorization is valid for 180 days from the date listed below. I may cancel this authorization by submitting a written request prior to the expiration. I understand that the revocation will not apply to the information that has been released in response to this authorization prior to my written request for revocation. I understand that my records may be faxed to the party named above. The purpose of this authorization is to improve the quality of my mental health evaluation or treatment.

_____ _____
Patient's Name Date

_____ _____
Patient's Signature Date

_____ _____
Parent/Guardian Signature (if patient is a minor) Date

THE FOLLOWING STATEMENT IS FOR CLIENTS INVOLVED IN CHEMICAL DEPENDENCY COUNSELING SERVICES.
Prohibition of re-disclosure: This release accompanies records concerning a client in alcohol/drug abuse treatment. This information has been disclosed to you from records protected by federal confidentiality rules (42 CFR, Part). The federal rules prohibit you from asking any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR, Part 2. A federal authorization for the release of medical or other information is not sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.