



## Palmetto Family Works, LLC

2135-B Hoffmeyer Rd, Florence, SC 29501-4087

121-A S. Acline St, Lake City, SC 29560

Phone & Fax: (843) 661-6030

102 Renaissance Cir, Mauldin, SC 29662-2455

Phone & Fax: (864) 538-6906

### Request/Authorization to Release Protected Health Information

---

Records Released to       Records Requested from

Provider/ Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

#### A. Client Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Parent/guardian (if applicable): \_\_\_\_\_

**B. I hereby authorize the source named above to send, as promptly as possible, the records listed below marked by an X in the boxes below:**

Request    Release

    All Inpatient treatment records for physical &/or psychological, psychiatric, or substance abuse  
Approximate date(s) of inpatient admission: \_\_\_\_\_

    All Outpatient treatment records for physical &/or psychological, psychiatric, or substance abuse  
Approximate date(s) of outpatient services: \_\_\_\_\_ Clinician: \_\_\_\_\_

    Psychological evaluation(s) or testing records, and behavioral observations or checklists completed

    Psychiatric evaluations, reports, or summaries.

    Treatment plans, recovery plans, or aftercare plans.

    Admission and discharge summaries.

    Social histories, or Assessments with diagnoses, prognoses, & recommendations.

    Academic or educational records (including achievement test results), Report of teachers' observations.

    Progress Summary

    Other: \_\_\_\_\_

