PRIVACY POLICY

This explains HIPAA laws and when and how our office can release information about you.

Protected health information includes descriptive information that can be used to identify a person and that relates to the treatment for a mental health condition. The protected health information includes information from the past, present, or future. The right to privacy continues after death.

A & M Psychiatric Services doesn’t release health information about people who receive services from our office.

This means our office cannot release:

---Information that will tell people who you are or where you live
---Information about your mental health or condition
---Information about any of the services you are receiving
---Information about how your services are paid for

If you choose to sign a consent form for a particular person or facility; our office can release the requested information to only that person or facility.

Our office is not required to release copies of records to individuals. The release of records to individuals is determined by the clinician.

There are some special circumstances when our office is required to release information about you, even if you haven’t given us permission to do so.

For example:

---If you are sick or hurt
---If you are not safe to take care of yourself
---If you try to hurt someone or someone is trying to hurt you
---If you tell us about child abuse
---Under a court order

By signing this form you are stating that you have read and understand the terms stated within.

___________________________________________________  ____________________
Client Signature                                      Date

___________________________________________________  ____________________
Parent/Guardian Signature                             Date

___________________________________________________  ____________________
Witness                                              Date