

Acadia Hospital

Acadia Healthcare

AUTHORIZATION TO RELEASE HEALTHCARE INFORMATION

Patient Identification

Supervised Review of Behavioral Health Treatment Records

For Services at Northern Light Acadia Hospital or Northern Light Acadia Healthcare

For Clinical Use Only

Any review of behavioral health treatment records by the patient must be supervised by the treating clinician or designee and documented below:

1. Date of Review: _____
2. Name of Person Supervising the Review: _____
3. This review: Is routine
 Involves reasonable concern of possible harmful effect to the patient
4. In cases where access of the guardian to the record would create documented imminent danger to the patient, was access to all or part of the record denied to the patient or guardian?
 Yes No
5. If access was denied, explain the reason for the denial and indicate the portion of the record subject to the denial: _____

Signature of Reviewer: _____ Date: _____ Time: _____

Date Reviewed: February 8, 2019

Date Revised: February 8, 2019



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