



GKB Neuropsychology

George K. Bialkowski, Psy.D., PLLC d/b/a GKB Neuropsychology

1560 Wall St., Suite 304, Naperville, IL. 60563

Phone: (630) 379 – 3457

Fax: (630) 708 – 7445

Email: info@gkbneuropsychology.com

Authorization to Release Information

Patient Name: _____ **DOB:** _____

I, _____ (Patient/Parent/Guardian), authorize Dr. George K. Bialkowski, Psy.D. of George K. Bialkowski, PLLC d/b/a GKB Neuropsychology to release neuropsychological evaluation information concerning the above-named patient.

Release To:

Name/Organization: _____ Phone: _____

Address: _____ Fax: _____

Email (if applicable): _____

Purpose and Information to be released:

Purpose: ☐ Medical care ☐ Education planning ☐ Legal ☐ Disability benefits ☐ Other: _____

Information to Release:

☐ Complete evaluation report ☐ Summary only ☐ Test scores ☐ Recommendations

☐ Specific sections: _____

Conditions and Rights

I understand that:

- This authorization is voluntary and I may refuse to sign without affecting my care (except when evaluation was specifically for third-party disclosure)
- Information cannot be re-disclosed by recipient without my separate written consent
- I may revoke this authorization in writing at any time
- This authorization expires: _____ or ☐ 365 days from signature (if no date specified)

Patient Signature (if 18 or older): _____ **Date:** _____

Parent/Guardian Signature (if patient under 18): _____

Witness Signature: _____ **Date:** _____

Substance abuse records (if applicable): Any substance abuse treatment information included in this release is protected by federal confidentiality rules (42 C.F.R. Part 2). The federal rules prohibit the recipient from making any further disclosure of this information unless further disclosure is expressly permitted by written consent of the person to whom it pertains or as otherwise permitted by 42 C.F.R. Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient.