# AUTHORIZATION TO OBTAIN OR RELEASE RECORDS

**I,**  \_\_\_\_\_ **, hereby authorize Dynamic Services to exchange**

**(legal representative)**

**information regarding**  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_  **with**

**(Consumer)**

\_\_\_\_\_\_\_\_\_\_\_\_Dynamic Services\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Agency)**

**I give Dynamic Services the right to exchange only the information that I have initialed below.**

County ISP  Psycho/Social Assessment

Physical and Medical History  Vocational Assessment

Medical Records  School IEP

Physician’s Orders  Behavior Plan

Mental Health Status Exams  Psychological Testing

Progress Notes and Reports  Discharge Summaries from former Provider

Incident and controlled procedure reports  Financial information

Other: Please List:

Purpose or use of information:

For the purpose of program planning, county request, and/or license requirements. Any incident or emergency controlled procedure reports may be shared with the Human Rights and/or Safety Committee. We also at any time may need to share information with DHS, MDH, CARF, and other licensing or accreditation services to meet quality standards.

I understand that my records are protected under State and Federal confidentiality regulations and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I also understand that I may revoke this consent at anytime by providing written notification to Dynamic Services and that in any event this consent expires automatically as described below. I understand that information at Dynamic Services is limited to staff whose work assignments reasonably require access to my data within the purposes specified in the services provided.

Date, event, or condition upon which this consent expires: (max 1 year)

Executed this: (start date)

Signature of Consumer:

Signature of Parent or Guardian, (when appropriate):

Signature of Witness:

**Phone (507) 258-3950**

**Fax: (507) 258-3950**