



Dr. Leah Farrell-Carnahan, PhD
Licensed Clinical Psychologist
Atlanta CBT, LLC
118 East Maple Street
Decatur, Georgia 30030
(404) 710-6605

Consent to Release Confidential Information

I authorize Dr. Leah Farrell-Carnahan, PhD., L.C.P. to use and disclose the following health information:

- Entire record
- Discharge summary
- Other: _____

I authorize use or disclosure of the health information by Dr. Leah Farrell-Carnahan, PhD., L.C.P. for the purposes of:

- Coordination of treatment
- Other: _____

This information may be disclosed to the following individual or organization:

Name: _____

Address: _____

Telephone: _____

If I check the following box, the individual or organization named above may also disclose information to Dr. Leah Farrell-Carnahan, PhD., L.C.P. for the purposes described above.

As the person signing this consent, I understand that I am giving permission for _____ to disclose confidential information or records. I also understand that I have the right to revoke this consent at any time, but that my revocation is not effective until it is delivered in writing to Dr. Leah Farrell-Carnahan, PhD., L.C.P. A copy of this consent and a notation concerning the persons or agencies to whom disclosure was made will be included in my original records.



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Print client's name

Signature of client/legal guardian/parent

Print legal guardian/parent name if client is a minor

Date