

NRS

NEUROPSYCHOLOGY
REHABILITATION
SERVICES

LS

LIFE SPAN
Behavioral
Health

www.nrslifespan.com

Robert. B. Sica, Ph.D., Director

License # 1519

Board Certified, American Board of Professional Neuropsychology #255

Fellow, American College of Professional Neuropsychology

National Register of Health Service Providers in Psychology

Steven P. Greco, Ph.D.

License # 4517

Pediatric and Adult Clinical Neuropsychology

Board Certified, American Board of Professional Neuropsychology #482

Fellow, American College of Professional Neuropsychology

Release Form

PATIENT NAME: _____

I do hereby authorize NRS Lifespan to discuss my/my child's personal health information including furnishing full reports, medical records, diagnosis, treatment, prognosis, etc., to the following listed below...

For example, please list: Physician (s), Insurance Company, School, Attorney, Significant Other, Parents/Guardians.

If you choose not to release any personal health information, please write N/A and sign below.

Signature (if patient is under the age of 18, parent signature is required)

_____/_____/_____
Date

I, the undersigned, understand that I have the right to revoke this authorization. I understand the revocation must be in writing and bear my signature. My revocation must be submitted to the above healthcare provider. I understand that if I do revoke this authorization, my revocation will not affect any prior actions taken in reliance on this authorization.

Member, Neuroscience Division, Meridian Health System

Post-Doctoral Neuropsychology Residency Program. Accredited by The Academy of the American Board of Professional Neuropsychology

ALL CORRESPONDENCE TO:

Neptune City Medical Arts Building
2100 Route 33, Suite 9-10, Neptune, New Jersey 07753
732-988-3441 | Fax 732-988-7123

Lakewood Office:

Parkway 70 Plaza
1255 Route 70, Suite 25-S, Lakewood, New Jersey 08701
732-961-9701