



## CONSENT FOR TREATMENT AND AUTHORIZATION TO RELEASE INFORMATION

1. **CONSENT FOR TREATMENT:** I voluntarily consent to and authorize the healthcare staff at Baron Cardiology Group, PC, including its physicians, nurse practitioners, and/or physician assistants, to administer such medical care, evaluation, and treatment as is medically necessary to the patient identified below. This would include such services as care, diagnostic procedures, and/or medical treatments as the treating provider deems reasonable and necessary. This would include, but not be limited to, the performance of services involving pathology and radiology. In the event that invasive procedures are deemed medically necessary, I further understand that additional consent will be obtained. I am aware that the practice of medicine and surgery is not an exact science and I acknowledge that no guarantees have been made to me as to the results of treatment or examination.
2. **RELEASE OF INFORMATION:** I authorize Baron Cardiology Group, PC, to obtain the patient's health information from other health care providers and health care facilities, and to release the patient's health information to any healthcare provider involved in the patient's treatment, including but not limited to, health care facilities to which the patient is admitted, discharged, transferred, and/or presents for treatment. I understand that the patient's health information may be transmitted in electronic or paper format, or verbally. I authorize Baron Cardiology Group, PC, to access and use the patient's prescription information from any health care provider or benefits manager including prescriptions that have been submitted for claims to any insurance plan. I understand that I have a right to request restrictions on how my health information is used or disclosed for treatment, payment, and/or health care operations and that this practice is not required to agree to such a restriction request.

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Patient Name (print)

Date of Birth

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Patient/Responsible Party/Parent/Guardian Signature

Today's Date

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Witness

Today's Date