



ELIZABETH LAYTON CENTER

For Hope and Guidance

HOUSE BILL 2213 PHYSICIAN DISCLOSURE DOCUMENTATION

Client's Name: _____

House Bill 2213 requires disclosure to clients, that certain mental disorders can have medical or biological origins, and that you should consult with a physician regarding such.

In addition, _____ is a therapist with a masters degree in (psychology, social work, counseling, or marriage and family therapy) and holds the title of LMSW, LCSW, T-LMLP, LMLP, LCP, T-LP, LP, LPC, LCPC, LMFT and/or LCMFT as such, the licensee does not have a medical doctors degree and is not authorized to practice medicine and surgery and is not authorized to prescribe drugs.

Client Signature

Date

Parent's Signature, if client under 14

Date