

Maegen S. Vincent, MD, LLC  
Maegen S. Vincent, MD (she/her)  
Adolescent, Young Adult, and Reproductive Psychiatrist  
2018 Prytania Street, New Orleans, LA 70130  
Phone: 504-233-6787  
Fax: 504-977-4990  
Email: drvincent@vincentpsychiatry.com

### **CONSENT FOR TREATMENT**

The undersigned patient or responsible party (parent, legal guardian, or conservator) consents to, and authorizes services, by Maegen S. Vincent, MD, LLC. These services may include psychotherapy, medication therapy, laboratory tests, diagnostic procedures, and other appropriate alternative therapies.

The undersigned understands that he/she/they have the right to:

1. Be informed of and participate in the selection of treatment modalities.
2. Receive a copy of this consent.
3. Withdraw this consent at any time.

\_\_\_\_\_  
Patient's or Guardian/ representative's signature

\_\_\_\_\_  
Date and time of signature

\_\_\_\_\_  
Print name of patient

\_\_\_\_\_  
Print name of guardian/representative