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ADOLESCENT CONFIDENTIALITY STATEMENT

***Parent Information for Pediatric Visits  
Ages 12-21 years***

As children and adolescents mature and become more independent, both physiologically and socially, their physical health may be jeopardized. Risk-taking behaviors are increasingly observed in this age group.

We plan to discuss these issues with your child and offer non-judgmental support and advice. Confidentiality is promised to the adolescents as part of our working relationship. We do, however, strongly encourage them to discuss these issues openly with their families, and we will inform you if your adolescent poses a serious risk to him/herself or others.

Please advise us of any specific concerns you have regarding risk-taking behaviors or the emotional health of your adolescent.

Please sign indicating your understanding of the (above) information.

Adolescent's Name

Your relationship to above

Signature: \_\_\_\_\_

Date: