Department of Health Care Services Substance Use Disorder Compliance Division Licensing and Certification Section, MS 2600 P. O. Box 997413 Sacramento, CA 95899-7413 (916) 322-2911

Health Care Practitioner Incidental Medical Services Acknowledgement

I,(Health Care Practitioner) – Please Print	, have been advised and understand the
statutory and regulatory limitations on the servadmitted to,	vices that may legally be provided to clients
(Licensed Program Name)	, located at,
(Licensed Program Address)	,
a licensed alcoholism or drug abuse recovery have read and understand the statutory requir Code Section 11834.026(a).	•
I acknowledge incidental medical services doe medical care. Incidental medical services are	es not include the provision of general primary defined as:
(1) Obtaining medical histories.	
(2) Monitoring health status to determine we the patient in order to receive urgent or	whether the health status warrants transfer of emergent care.
(3) Testing associated with detoxification for	rom alcohol or drugs.
(4) Providing alcoholism or drug recovery abuse recovery or treatment services.	
(5) Overseeing patient self-administered m	nedications.
(6) Treating substance abuse disorders, in	cluding detoxification.
Health Care Practitioner Signature	Date
Health Care Practitioner License Number	