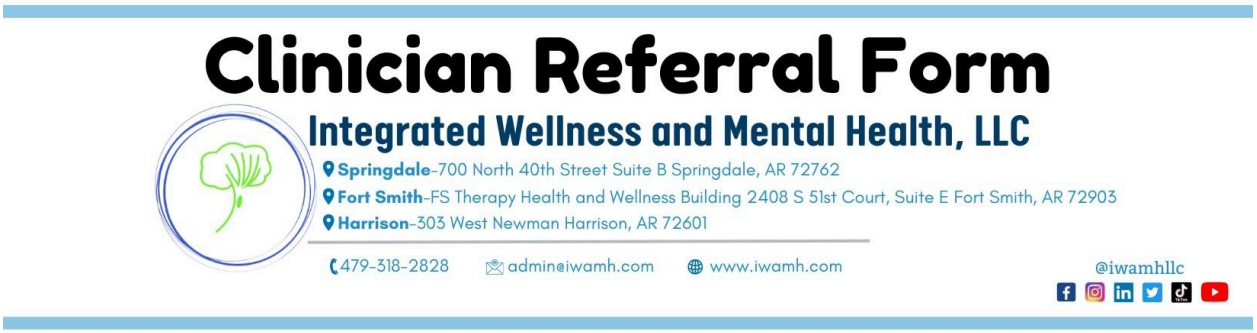
iwamh-clinician referral form

* Tumutukoy sa kinakailangang tanong



Please note that all our patients' information is protected and secured, in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA), a federal law protecting sensitive patient health information.

1. **Date Today** *

Halimbawa: Enero 7, 2019

PATIENT INFORMATION

2. **Patient's Name:** *

3. **Patient's Date of Birth:** *

Halimbawa: Enero 7, 2019

4. **Patient's SSN:** *

_____

5. **Gender (and/or) Pronoun:** *

_____

6. **Patient's Address (with City and Zip Code):** *

_____

7. **Patient's Email Address:** *

_____

8. **Patient's Phone Number:** *

_____

9. **REASON FOR REFERRAL** *

_____

10. **TO REFER, PLEASE ATTACH MEDICAL RECORDS and MEDICAL HISTORY**

    Mga isinumiteng file:

11. **PRESENTING SYMPTOMS:**

Select all that apply:

(lagyan ng check ang lahat ng naaangkop)

- [ ] Substance Abuse
- [ ] Gender Identity
- [ ] Insomnia
- [ ] Eating Disorders
- [ ] Personality Disorder
- [ ] Schizophrenia
- [ ] Obsessive-Compulsive Disorder (OCD)
- [ ] Post-Traumatic Stress Disorder (PTSD)
- [ ] Attention Deficit Hyperactivity Disorder (ADHD)
- [ ] Oppositional & Defiant
- [ ] Mood Disorder
- [ ] Anxiety
- [ ] Bipolar
- [ ] Anger
- [ ] Conduct Disorder
- [ ] Depression
- [ ] Iba pa: _____

12. **CURRENT PSYCHOTROPIC MEDICATIONS**

Select all that apply:

(lagyan ng check ang lahat ng naaangkop)

- [ ] Patient is not yet taking any psychotropic medications.
- [ ] Abilify
- [ ] Ambien
- [ ] Ativan
- [ ] Buspar
- [ ] Celexa
- [ ] Cymbalta
- [ ] Effexor
- [ ] Klonopin
- [ ] Laxapro
- [ ] Paxil
- [ ] Pristiq
- [ ] Remeron
- [ ] Seroquel
- [ ] Vistaril
- [ ] Xanax
- [ ] Zoloft
- [ ] Zyprexa
- [ ] Iba pa: _____

REFERRING PROVIDER INFORMATION

13. **Referring Clinician Name:** *

_____

14. **Facility Name:** *

_____

15. **Your Phone Number:** *

_____

16. **Email:** *

_____

Thank you so much for referring your patient to our clinic. Your trust in our services is truly appreciated.

If you have any question regarding our clinic and services, please do not hesitate to contact us :

Integrated Wellness and Mental Health, LLC

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@iwamhllc