7317 Hanover Parkway ♦ Suites A & B
Greenbelt, MD 20770
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(P) 301-220-2842 ♦ 301-220-3842(F)

ADULT PRP REFERRAL FORM

DATE OF REFERRAL: ______________________ MEDICAL ASSISTANT #: ________________________________

CLIENT NAME: ________________________________ DOB: __________ AGE: _______

SS#:_______________________ RACE: __________ MALE ☐ FEMALE ☐

CURRENT ADDRESS: ____ CITY: _____________________________

STATE: _______________________ ZIP: ______________________________

PHONE #: (__________) __________-__________ ALTERNATE PHONE #: (________) ________ - __________

CAREGIVER (if applicable)_________________________________

PHONE #: (_______) ________-________ CELL #: (______) _______-_______

REASON FOR REFERRAL ***(check all that apply):***

☐Emotional/Mental Illness ☐Employment Instability ☐Financial Instability/Difficulty ☐Behavior/Conduct Problems

☐Legal/Incarceration ☐Medication Mismanagement/Monitoring ☐Physical/Emotional Abuse ☐Relational Conflicts

☐Sexual Abuse ☐Social/Interpersonal Challenges ☐Substance Abuse ☐Suicidal/Homicidal ☐School Problem/Suspension

☐CPS Involved ☐ Homelessness/At Risk of Homelessness

PRP SERVICES REQUESTED ***(check all that apply):***

Self-care skills: ☐Personal Hygiene, ☐Grooming, ☐Nutrition, ☐Dietary Planning, ☐Food Preparation ☐Self Administration Of Medication.

Social Skills: ☐Community Integration Activities, ☐Developing Natural Supports, ☐Developing Linkages with and Supporting the Individual's Participation In Community Activities.

Independent living skills: ☐Skills Necessary For Housing Stability, ☐Community Awareness, ☐Mobility And Transportation Skills, ☐Money Management, ☐Accessing Available Entitlements And Resources, ☐Supporting The Individual To Obtain And Retain Employment, ☐Health Promotion And Training, ☐Individual Wellness Self Management And Recovery.

SYMPTOMS AND BEHAVIOR/RISK BEHAVIORS ***(check all that apply):***

☐Anxiety/Panic ☐Attachment Problems ☐Depressed ☐Fire Setting ☐Homicidal Ideations ☐Hopeless/Helpless

☐Hyperactive ☐Impulsive ☐Irritable ☐Isolative ☐Lying/Manipulative ☐Manic Mood ☐Obsession/Compulsion

☐Oppositional Defiant ☐Physical Aggression ☐Property Destruction ☐Running Away ☐Self-Care Deficit

☐Self-Injurious Behavior ☐Separation Problems ☐Sexually Inappropriate ☐Social/Withdrawal ☐Stealing

☐Suicidal Ideations ☐Trauma-related ☐Truancy ☐Verbal Aggression ☐Other

Updated 12/16/14

PLEASE INDICATE CURRENT DSM V DIAGNOSIS ***(Please do not add diagnosis to the form):***

AXIS I:

☐ **295.10-SCHIZOPHRENIA, DISORGANIZED**
☐ **295.20-SCHIZOPHRENIA, CATATONIC**
☐ **295.30-SCHIZOPHRENIA, PARANOID**
☐ **295.40-SCHIZOPHRENIFROM DISORDER**
☐ **295.60-SCHIZOPHRENIA, RESIDUAL**
☐ **295.70-SCHIZOAFFECTIVE DISORDER**
☐ **295.90-SCHIZOPHRENIA, UNDIFFERENTIATED**
☐ **296.33-MDD, SEVERE W/O PSYCHOSIS**
☐ **296.34-MDD, SEVERE WITH PSYCHOSIS**
☐ **298.90-PSYCHOTIC DISORDER NOS**
☐ **296.43-BIPOLAR I, MOST RECENT MANIC, W/O PSYCHOSIS**
☐ **296.44-BIPOLAR I, MOST RECENT MANIC, WITH PSYCHOSIS**
☐ **296.53-BIPOLAR I, MOST RECENT DEPRESSED, W/O PSYCHOSIS**
☐ **296.54-BIPOLAR I, MOST RECENT DEPRESSED WITH PSYCHOSIS**
☐ **296.63-BIPOLAR I, MOST RECENT MISSED W/O PSYCHOSIS**
☐ **296.64-BIPOLAR I, MOST RECENT MIXED WITH PSYCHOSIS**
☐ **296.80-BIPOLAR DISORDER NOS**
☐ **296.89-BIPOLAR II DISORDER**
☐ **297.10 DELUSIONAL DISORDER**

Is Client On Medication? ☐ Yes ☐ No. If yes, please list medication and dosage: ____________________________________

____

Does Client Have A History Of Psychiatric Hospitalization? Date and Time: ____

____

Is client currently receiving Mental Health Services ☐ Yes ☐ No

___________________________________ ____________________

Treating Therapist ***Phone#***

____ _______________

Referring Mental Health Professional Signature and Credentials ***Date***

☐ ***I am authorized or have been given authorization to give consent for Utopia's PRP to collaborate with service providers to receive and verify the information on this form for screening assessment purposes, and to determine the appropriateness of services for above-referenced individual.***

Updated 12/16/14