



**Clinical Data (continued)**

Dimension 3 — Emotional, behavioral, or cognitive conditions:

Dimension 4 — Readiness to change (current stage):

Dimension 5 — Relapse, continued use, or continued problem potential:

Dimension 6 — Recovery/living environment:

Has your patient had a mental health assessment?  Yes  No

List date of assessment, provider, resulting diagnosis, and treatment objectives to address areas of concern:

Is your patient currently taking psychotropic medication?  Yes  No  Not Sure

List current medications:

Type of prescribing clinician:  PCP  PMHNP  Psychiatrist  Other:

**Clinical Data (continued)**

Are you coordinating care with the prescriber?  Yes  No

Is your patient involved with other types of providers/community services?  Yes  No

Describe coordination of care:


Describe after-care plans:


Comments:


If you have any questions please call [Amanda Williams] at [(541) 706-5186] or toll-free at [(800) 431-4135], 8:00 a.m. to 5:00 p.m., Monday through Friday.

Sincerely,

[Amanda Williams]  
Behavioral Health Services  
PacificSource Community Solutions, Inc.