Worksheet for Referrals to Acadia Hospital's Adult Intensive Outpatient Substance Abuse Program

		_	
Patient Name:	ohone nu	ımber: ַ	
MR:			
Section	I		
*Diagnostic Criteria for Substance Dependency. (Dependency requires meeting 3 or more criteria on 1-7.)	Meets Criteria Yes No		Notes/supporting documentation
1) Tolerance, as defined by either of the following: a) A need for increased amounts of the substance to achieve desired effect OR b) markedly diminished effect with continued use of the same amount of the substance			
 Withdrawal, as manifested by either of the following: Characteristic withdrawal symptoms observable and reported OR the same amount of the substance (or a closely related substance) is taken to relieve or avoid withdrawal symptoms The substance is often taken in larger amounts or over a longer period of time than intended There is a persistent desire or unsuccessful efforts to cut down or control substance use A great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects Important social, occupational, or recreational activities are given up or reduced because of substance use The substance use continues despite knowledge of having a persistent or recurrent physical or physiological problem that is likely to have been causes 			
or exacerbated by the substance			
TOTAL (If 3 or more "yes" responses go to next section. If less than three "yes" responses patient does not meet criteria for direct referral)			
	_		
Section I	Yes	No	
8) Presenting with psychotic symptoms	168	110	
9) Presenting with symptoms of dangerousness to self or			
others			
10) Level of distress warrants further evaluation			
11) The patient has the ability to attend outpatient			
programming at Acadia Hospital (M-F)			
If any shaded box is checked in section II, refer particles to Consult Clinician. If no shaded boxes are checked of substance dependency (3 or more on section I), 6048) and fax copy of checklist to 973-6107 and as evaluation/admission to substance abuse services as	l and pa call Aca k patien	tient me dia Hos it to arri	eets criteria for diagnosis pital Access Center (973- ive at Acadia for

1-7 represent criteria from the American Psychiatric Association (2000). Diagnostic and Statistical Manual or Mental Disorders, Fourth Edition, Text Revision. Washington, DC, American Psychiatric Association page 181.

Date

Provider Signature