

Panacea Sober Living Services Referral Form

Email: Panaceahealthcarellc@gmail.com

Fax: (502) 699-2890

Date: _____ Client Current location: _____
Referral Source: _____ Referral Contact# _____
Referral Email: _____ Legal Services needed: _____
Potential Admission Date: _____ Date of phone interview: _____
Contact info of Case worker or therapist to corroborate information: _____

Applicant Information

Name: _____ Phone: _____
DOB: _____ Age: _____
Sex at Birth: _____ Email _____
Gender Identity: _____ Pronoun Set: _____
Address: _____ SSN: _____
City/State/Zip: _____

Insurance Information

Primary Insurance: _____ Group ID #: _____ Member ID #: _____
Policyholder: _____ Relationship to Insured: _____ Co-Pay: _____

1. Is the client willing to attend all services required by PSL: IOP, PSS, 12 step meetings, TCM, Individual therapy as needed or legally required? _____
2. History of violent or sexual criminal charges? _____
3. Can the client work? _____
4. Is the client currently on disability? _____
 - a. Reason for disability: _____
 - b. Does it limit activities of daily living? _____
5. Any need for special accommodations? _____
6. Do they have resources to get food, toiletries, etc. until they are employed? _____
 - a. What are these resources? _____
7. Are they currently enrolled in EBT food services? _____
8. Can they please call each week to check in so we know they still would like a bed? _____
9. Covid 19 Vaccination? _____

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Medical History _____

Any current withdrawal symptoms? _____ Seizures? _____

Traumatic Brain Injury? _____ Last Seizure & Cause _____

History of suicidal thought or attempts? _____

Current Medications, *Include Over-The-counter-medications, vitamins, herbs, etc., in addition to any past medications for mental health or substance use treatment.*

Medication	Reason For Taking	Dose & Frequency	Prescribed By or OTC	Start Date

Behavioral Health / Substance Use History

Mental Health / Substance Use Diagnosis	Provider	Dates	Intervention	Response

*Any information falsified or withheld will void potential admission upon arrival.