



## New England Division of General Practice Focused Psychological Strategies Referral Form Glen Innes

This service is free for patients referred by their GP, and should include a GP Mental Health Care Plan – faxed to the Division before commencement of the first 6 sessions. A 2<sup>nd</sup> referral is to be faxed to the Division before commencement of any additional sessions.

### CLIENT DETAILS

Name \_\_\_\_\_ DOB \_\_\_\_\_ M / F

Address \_\_\_\_\_ Postcode \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (mob) \_\_\_\_\_

Parent / Guardian Names (if client is under 18 years of age) \_\_\_\_\_

Pension/Health Care Card Yes / No Aboriginal/Torres Strait Islander Yes / No

**REFERRING GP** \_\_\_\_\_ Date \_\_/\_\_/\_\_

Address \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_

**Patient has been informed that the information contained in this referral will be sent to the NEDGP for allocation to a Psychologist**

### ICD-10 PRIMARY CARE DIAGNOSIS CATEGORIES

- |  |   |
|--|---|
| <input type="checkbox"/> F1 Alcohol & Drug use disorders | <input type="checkbox"/> F5 Unexplained somatic disorders |
| <input type="checkbox"/> F2 Psychotic disorders          | <input type="checkbox"/> Other                            |
| <input type="checkbox"/> F3 Depression                   | <input type="checkbox"/> Unknown                          |
| <input type="checkbox"/> F4 Anxiety Disorders            | <input type="checkbox"/> Perinatal Depression             |

### SERVICE REQUIRED

FPS – initial six sessions  Additional six sessions - \_\_\_\_\_ (psychologist)

Has the client ever accessed services through the Better Outcomes in Mental Health Care Program previously?

Yes / No Year \_\_\_\_\_ Psychologist \_\_\_\_\_

Suicidal thoughts	Yes <input type="checkbox"/> No <input type="checkbox"/>	Suicidal intent	Yes <input type="checkbox"/> No <input type="checkbox"/>
Current plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Risk to Others	Yes <input type="checkbox"/> No <input type="checkbox"/>

### CURRENT MEDICATIONS

- Benzodiazepines & anxiolytics
- Phenothiazines & major tranquillisers
- Antidepressants
- Mood stabilizers

New England Division of General Practice  
PHONE: 67711146

**PLEASE FAX REFERRAL TO THE NEW ENGLAND DIVISION OF GENERAL PRACTICE 67711170**