

# Specialized Outpatient Services Substance Abuse Services Referral Form

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Case Numbers: C \_\_\_\_\_ - \_\_\_\_\_

Date of Sentence: \_\_\_\_\_ (if applicable) or JD \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (DHS Only) KK \_\_\_\_\_

**Referral Source Information:** (Please write name of person who needs progress reports, incident reports, UA results, etc.)

Referral Name: \_\_\_\_\_ Work Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### Recommended Services:

**DUI Assessment-**  **English** or  **Spanish.** Consists of one 2 ½-hr. session.

**Substance Abuse Evaluation-**  **English** or  **Spanish.** Consists of one 2 ½-hr. session.

**10 Hour ADSAC (DUI) School-**  **English** or  **Spanish.** Consists of three 3 ½-hr. sessions.

**24 Hour ADSAC (DUI) School-**  **English** or  **Spanish.** Consists of twelve 2-hr. sessions.

**Victims Impact Panel.** Consists of one 2-hr. session, facilitated by (MADD) Mothers Against Drunk Driving

**DUI Outpatient Programs-**  **English** or  **Spanish**  6-week program

12-week program

20-week program.

**(Relapse Prevention/Aftercare Programs)**  6-week program

12-week program

20-week program.

**Cognitive Behavioral Skills Program-**12-24 week program for adolescents and adults, designed to challenge and correct irresponsible thinking and behavior, 1 ½ hours per week

**Anger Management/Coping Skills Program-**12-week program for adolescents and adults, 1 ½ hours per week.

**Early Intervention Programs -**  **English** or  **Spanish-** 6-week substance abuse education program for adults and 12-week substance abuse education program for adolescents. Random Drug Testing required.

**Extended Outpatient Programs -**  **English** or  **Spanish-** 12-24 week program (2-8 hours per week) for adults and adolescents. Random Drug Testing, individual, group, and self-help meeting attendance is required.

**Intensive Outpatient Programs -**  **English-** 6 week intensive program (9-hours per week) for adults. 6 week program (6-hours per week) for adolescents. Individual, group, and self-help meeting attendance is required. Random Drug Testing required

**Children's Outpatient Programs-** 3-day workshop to help the healing from parental substance abuse (children 6-13).

**Parenting Programs-** 16-week parenting program focusing on parenting issues with parents who have substance abuse issues.

**Level Of Identified Risk:** (Level checked indicates the risk of relapse/continued use or other behavioral/family problems)

**Low Risk-** (Risk is minimal) Early Intervention referral is indicated

**Medium Risk-** (Risk is moderate) Extended Outpatient referral with additional family services is indicated

**High Risk-** (Risk is extreme) Intensive Outpatient referral with additional family services is indicated

Case history, evaluation results, or comments supporting assigned level of risk: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referral Source Signature: \_\_\_\_\_

Date: \_\_\_\_\_

One you have completed this form please fax to 405-810-0331, your client may then come in M-F (9-6pm)