



REFERRAL FAX COVER PAGE

Date of Referral:

Referring Site:

Primary Care Provider Name:

Phone Number:

E-Mail:

Client Preferred OTN Site (if known):

OTN Site Name:

OTN System Number:

OTN Site Coordinator:

Phone Number (that can be reached to book OTN appointment):

Phone Number (that can be reached during the OTN appointment):

E-Mail:

Appointment Information (if known):

Date of Appointment:

Time of Appointment (**EST**):

OTN Event Notification ID #:

Inclusion Criteria

- Clients must be 18 years of age or older
- Clients looking for an assessment or consultation in general psychiatry
- Clients must be referred by a physician or NP with an active OHIP billing number
- Clients must be willing to participate via telemedicine (OTN)
- Clients must live outside of the greater Toronto and Hamilton area

Exclusion Criteria

- Clients 17 years of age or younger
- Clients in crisis who require immediate care or clients who are seeking ongoing treatment
- Clients seeking a third party assessment (e.g. ODSP, legal, child and family services, insurance)
- Clients living outside the province of Ontario

In order for us to process your request please provide us with the following information:

- **Completed CAMH Adult Referral Form** (NOTE: We do not currently offer service to individuals under the age of 18)
- **OTN site details** (see above)
- **Medical Reports**
- **Lab test results**
- **Pharmacy records** of patient's past and current medications
- **GAD-7 and PHQ-9 scales** – recommended to be completed before consultation. Can be found at <https://www.porticonetwork.ca/web/telemental-health/telepsychiatry>
- **ADHD scales** – ONLY REQUIRED if client is being referred for ADHD diagnosis or treatment. ASRS and WURS scales can be found at <https://www.porticonetwork.ca/web/telemental-health/telepsychiatry>

Please refer to the website below for an example of a completed appropriate referral.

PLEASE SEND TO: *CAMH TeleMental Health*

<https://www.porticonetwork.ca/web/telemental-health/telepsychiatry>

FAX: 416-260-4186 or

E-MAIL: TeleMentalHealth@camh.ca

Phone: 416-535-8501 ext. 34778.

Toll Free Phone: 1-800-463-2338

Thank You.

TeleMental Health Research: The Centre for Addiction and Mental Health (CAMH) is a teaching hospital committed to research in the field of mental health and addictions. As part of our ongoing efforts to improve patient care and program development, CAMH Telepsychiatry may invite your patients to participate in research and quality improvement initiatives. For further information, please contact:

David Rodie, Medical Head at David.Rodie@camh.ca