|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STAFF/TITLE**#: | | | **SERVICE DESCRIPTION (CODE)**: Date/Time of Admission: | | |
| **GUEST NAME:** | | **SSN:**      -     - | | **DOB:** | |
| **ADDRESS:** | | **CITY:**       **STATE:**       **ZIP:** | | | |
| **Phone Number:**      -     -  **Phone Type:**  52 Work 54 VMail 56 Emer 51 Home 53 Mobile 58 Other | | **Phone Status:**  11 Anytime, msg OK 12 AM Only, Msg OK 13 PM Only, Msg OK  21 Anytime, No Msg 22 AM Only, No Msg 23 PM Only, No Msg 31 Never Call | | | |
| **EMERGENCY CONTACT/NATURAL SUPPORT**  **NAME:**       **RELATIONSHIP:**       **PHONE:** | | | | | |
| **NAME OF TREATMENT PROVIDER:**       **CONTACT NUMBER:** | | | | | |
| **ETHNICITY** (self-reported, up to 3)  010 Other White  050 Other Race  604 Cambodian  618 Thai  999 Unknown  031 Asian Indian  100 Iraqi  605 Chinese  619 Vietnamese  032 Native Hawaiian  105 Iranian  608 Filipino  655 Samoan  033 Other Pacific Islander  108 Bosnian  611 Japanese  660 Guamanian/Chamorro  034 Other Asian  110 Russian/Ukrainian  612 Korean  935 Eskimo  040 Black/African American  597 American Indian  613 Laotian  941 Aleut | | | | | **HISPANIC ORIGIN**  998 Not Spanish/Hispanic  000 General Hispanic  999 Unknown |
| **SERVICE COUNTY**  Island  San Juan  Skagit  Snohomish  Whatcom |
| **PRIMARY REASON FOR REFERRAL**  1 Mainly Mental Disorder  2 Mainly CD Disorder  3 Co-Occurring MH & CD | **SPECIFIC REFERRAL SOURCE INFORMATION**  1 Community CD Provider  2 Community MH Agency  4 Individual Professional Staff  5 Self  6 Employer or Co-Worker  7 Family or Friend  8 Hospital ER  9 Hospital Medical Unit  10 Hospital Psychiatric Unit  11 Law Enforcement Agency  12 MH Eval & Tx Facility  13 Residential Facility  14 Sobering Center or Detox  16 Other:        21 Social Service Agency  22 Probation  23 Corrections  24 Court  25 School  26 Tribe  27 State Hospital (WSH, ESH, or CSTC)  90 Crisis Stabilization – Whatcom  91 Crisis Stabilization – Skagit  92 Crisis Triage - Snohomish | | | | |
| **LAW ENFORCEMENT DROP-OFF**  Yes  No |
| **EMS DROP-OFF:**  Yes  No | **REFERRING HOSPITAL**  740 Affiliated Health (Skagit)  742 St Joseph-B’ham  058 Mukilteo E&T  655 Swedish - Edmonds  607 Fairfax – Kirkland  10205-Fairfax – Everett  Fairfax – Monroe  638 Providence Everett  Evergreen – Monroe  Telecare E&T – Sedro Woolley  482 Kitsap E&T  431 Western State Hospital  668 Yakima Valley Memorial Hospital  657 Swedish – Seattle  677 UW Medical Center  Other: | | | | |
| **ADMIT DIAGNOSIS:**  R69 – Illness Unspecified |
| **FACILITY TYPE**  Stabilization  Triage |