

Mental Health Information on an Inmate Currently in Outpatient Care

Attention: Jail Health Psychiatric Staff

Confidential fax: 206-296-0299

Phone: 206-296-1770

Client name (write all information large and legibly): _____

Client DOB: _____

Diagnosis: _____

Current psychiatric medications: _____

Client's pharmacy phone/fax numbers: _____

Recent medication compliance (check one):

- Good recent medication compliance
- Poor medication compliance over the last week
- Don't know, but usually good compliance
- Don't know, but usually poorly compliant
- Don't know

Optional additional information:

Active physical health problems _____

Medications for non-psychiatric problems _____

Allergies _____

Current risk factors for suicide or violence _____

Active substance use, including tobacco use (specify)

Other _____

Case manager:

Date:

Best number for jail to call for additional information: