

PO Box 6033 928-523-2131 Flagstaff, AZ 86011 928-523-4411 fax

nau.edu/campus-health-services

Hello,

During that last few weeks of each semester, Campus Health Services sometimes receives an increased volume of patients requesting initial psychiatric or mental health evaluations and requests for medication.

Patient safety concerns can arise as these medications require close follow up. Often patients are returning to their hometown over breaks from academic classes (winter and summer) or they are graduating.

Your safety is important to us and because of this, we have a policy that any patients started on new psychiatric medications have a follow-up plan. This plan may include having a provider at home follow up with you over break, or you may be available to be seen again here at Campus Health over break. Any decision regarding medication management will be made by the provider based upon their evaluation of you. At no time do we wish to dissuade or discourage you from scheduling an appointment solely because you will not be available for follow up with your CHS provider.

You have a responsibility to make arrangements for a follow up appointment with a provider of your choice if you are interested in receiving medications and will not be available for a follow up appointment with your Campus Health Services provider. The follow up appointment must be with a licensed provider with prescriptive authority. This plan guideline is on the next few pages.

Thank you. Your health and safety is our primary concern,

Sandra Smith MD Medical Director NAU Campus Health Services



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MENTAL HEALTH END-OF-SEMESTER TREATMENT AGREEMENT FOR FOLLOW-UP

- 1. I understand that follow up within 4 weeks from the appointment time at Campus Health is

	appropriate interval.)
2.	I understand that if follow up is to be performed with another provider at a different location
	then arrangements must already be in place and I agree to keep the follow up appointment:
	Provider name and title:
	Date and time of appt.:
3.	Prior to appointment with follow up provider, I may contact a CHS provider for any questions/concerns or significant side effects including suicidal thoughts, negative mood changes, or other severe side effects, (928) 523-2131.
4.	I MUST sign a "Release of Information" form PRIOR to my CHS appointment in order for the CHS provider to fax the confidential psychiatric/mental health evaluation to my provider that I will see over the Summer/Winter Break or after graduation. The instructions to find/ sign this form are as follows:
-	Go to www.campushealth.nau.edu
-	Log in
-	Put in your date of birth
-	Go to messages
-	Go to new messages
-	Go to release of medical records
-	Sign and submit medical (not counseling) form
_	ENTAL HEALTH END-OF-SEMESTER TREATMENT AGREEMENT FOR FOLLOW-UP form be signed and brought to your upcoming appointment at CHS for a psychiatric evaluation.
Patient	Signature Date
Patient	Name (printed)
Patien	ID#
Provid	er Signature Date
Provid	er Name (printed)



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WHAT HAPPENS IN THE PSYCHIATRIC/Mental Health EVALUATION AT CAMPUS HEALTH SERVICES

- During your appointment at CHS, you will have a psychiatric/mental health evaluation. This will allow time for us to discuss your family, social, medical and past psychiatric history. This evaluation is done in order to make an assessment of what may be a diagnosis of a psychiatric disorder and to make a medication recommendation, if appropriate.
- During this appointment, we may or may not recommend medications. This will be assessed on an individual patient basis and based on patient safety, risks and benefits. Whether medications are started or not at your CHS appointment, we will be able to provide a printed evaluation with our recommendations for medication treatment.