

## Process for Referring Patients to CAPS

<b>Urgent</b>			
Urgent Mental Health Concern	ex. safety concerns, suicidal ideation, psychotic or bipolar symptoms, assault, acute significant emotional distress, panic attacks, functional impairments, severe depression, PHQ-9 question #9 is $\geq 1$ .	GM provider to call and speak directly with Emergency Consult Service (ECS) provider. CAPS referral form not required.	Student will meet with ECS provider same day. ECS provider will provide patient feedback to referring GM provider.
<b>Routine</b>			
General CAPS referral (non-urgent)	ex. stress, sleep problems, mild to moderate anxiety/ depression without red flags, relationship problems, grief and loss, interested in CAPS group, need for psychiatry in the community, PHQ-9 score $\geq 10$ (consider ECS as needed).	GM provider to complete CAPS Internal referral form and route to CAPS Care Manager. If PHQ-9 score $> 14$ , choose time frame for appointment "as soon as possible."	Student will be contacted by phone by CAPS clinician within 1 week. Care Manager will assist student with appointment inside or outside of CAPS. Care Manager will update referral form with appointment information, lock, and internal message info to referring provider.
Direct consultation with psychiatrist	ex. consideration of more direct route to CAPS psychiatry, clinical consultation	GM provider to consult with Lillian Mezey during her scheduled consultation hour or send internal message which she will review during that time (Wed 9-10 am).	Dr. Mezey will either talk directly with GM provider or provide feedback via internal message.
Mental Health clearance for physical form	ex. patient needs physical form completed for program (such as Peace Corps) and has been previously seen in CAPS	GM provider to seek input from CAPS provider who previously saw patient via internal message, in-person, or phone call. If CAPS provider not available, GM provider will give form to CAPS receptionist to pass on to ECS clinician for review.	CAPS provider will review their notes and then provide feedback to the GM provider in-person or by internal message or phone call.
<b>Elective</b>			
General Mental Health Concern	ex. patient stable and does not wish to schedule appointment at this time, PHQ-9 score $\leq 9$ .	GM Provider to provide patient with <i>Mental Health Resources</i> handout.	

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### FAQ's:

#### **1. How do I send CAPS an internal referral?**

- Go to the Plan section of the SOAP note
- Click the telephone icon labeled "Referral"
- In the "set" drop down box, select "Referral and Consult orders"
- Choose "Consult-GM to CAPS"
- In the upper left hand corner select "CareMgr" in the route to box. This is very important! Do not route to a specific care manager, since this is a rotating responsibility in CAPS.
- Complete the template/ order form as prompted, then click sign.

#### **2. How will I know if the referral has been reviewed and attended to by CAPS?**

- The CAPS Care Manager will append the form with disposition information, lock it, and then send via internal message back to the referring provider.

#### **3. Where I can find the Mental Health Resources Document?**

- Go to the Plan section of the SOAP note
- Click on the ABC icon labeled "Education"
- Type Mental Health into the search box
- Select "Mental Health Resource Info"

#### **4. If I want to administer a PHQ-9 questionnaire to a patient, where can I find it?**

- Go to the Assessment section of the SOAP note.
- Select the "Depression Screening"
- Nurses also have paper copies in the modules, but please transfer information to the template in EMR.