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(HERE247)

Call anytime to access Addictions, Mental Health & Crisis Services Waterloo-Wellington



CMH Community Mental Health Services 700 Coronation Blvd., Cambridge, ON N1R 3G2 Phone (Intake) : 519-621-2333, ext. 3300

Request for (18 years of age and older) Adult Outpatient Mental Health Service FAX FORM TO HERE 24/7 @ FAX: 1-844-437-3329

Urgent Response / Non-Urgent Response options for Mental Health Services and Psychiatry Consultation. Includes 'Please Choose One' instructions.

Please ensure this form is fully completed to avoid delay in processing

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PATIENT INFORMATION (Affix Label)

Patient Last Name: _____ First Name: _____

Address: _____

Date of Birth: dd _____ mm _____ yyyy _____

OHIP Number: _____ Version code _____

*****Please confirm phone numbers: Home _____ Cell _____

PERMISSION TO LEAVE PHONE MESSAGE? [] YES [] NO

HEALTHCARE PRACTITIONER INFORMATION:

Referring Practitioner: _____

Direct Phone (back line): _____ Fax: _____

Physician Billing # _____

What is the clinical history and clinical question you would like answered? What have you already tried? (please be detailed and specific regarding signs, symptoms, and diagnosis if available).

Has the patient been involved with Mental Health Services or Psychiatry in the past? [] Inpatient [] Outpatient

If yes, specify where and when service was provided. Include collateral documentation, SW and MH team notes.

Is patient aware of and agreeable to referral? [] Yes

Healthcare Practitioner: _____ Date: _____

Please attach current and historical medication list and allergies

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