



San Mateo County Behavioral Health and Recovery Services

ACCESS Team, 1950 Alameda de Las Pulgas, San Mateo, CA 94403

Phone: 1-800-686-0101

FAX: (650) 349-0771

Request for ACCESS Psychiatric Medication Assessment

The primary care physician (PCP) is usually the initial contact to request medications for your client. Please consult with your client's PCP as the first step in a medication request. If your client's PCP is unable to provide medication, please complete the following referral form and return it to ACCESS by postal mail to the address above or by fax to 650-349-0771

Date of Request: _____

Mental Health # _____

Client Name: _____

DOB: _____

DIAGNOSTIC IMPRESSIONS

DSM5 _____

DSM5 _____

DSM5 _____

Name of PCP _____ PCP Office Phone _____

Reason PCP is unavailable to provide medications:

Medication (Medication name, dose, frequency, and prescribing M.D.)

Mental Health Hospitalization (location and date):

Please list your specific concerns and/or questions for the psychiatrist or nurse practitioner to address, including a brief history of treatment and prior medications. (e.g., reason for evaluation for medication, change of meds, and consultation with PCP.)

Provider Name/License _____

Telephone # _____