



Community Integrated Health Services

Adult Substance Use Disorder Outpatient Referral Form

Our Adult SUD Outpatient program offers all levels of care to include DUI assessments and deferred prosecution treatment. We work closely with other programs both internally and externally to meet the needs of the client to include detox placement and residential coordination.

We are currently providing services with those who are Medicaid eligible.

Instructions:

- **Submit this referral form and any attachments via Fax: (844) 554-3370 or (360) 748-4480, in person, via email Scheduling@cihealthservices.com or by mail** (see next page for mailing addresses.)
- **For DUI assessments and Deferred Prosecution cases, we require a copy of the police report and driving abstract.**
- Please complete this referral form and attach a copy of your insurance card and any additional information if available.
- CIHS will confirm receipt of the referral and will contact you within seven business days of receipt of request.

Individual Requesting Services

Please select your county of residence:

- Cowlitz Lewis Grays Harbor Pacific

First Name: _____

Last Name: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Gender: Male Female Transgender
 Intersex Decline to Answer
 Unknown

DOB: _____

Phone #: _____

Provider One #: _____

Reason for Requesting Services

- Referred by a Provider. Who: _____ Why: _____
- Legal issues: Explain _____
- Pending charges: _____
- Employment related issues: Explain _____
- Self-motivated reasons: Explain _____
- Other: _____

Diagnosis (if known) and/or Symptoms

Previous Substance Use Treatment in the past to include outpatient, residential, and/or detox. No Yes

If yes, with who and when? _____

Did you successfully complete the treatment? Yes or No If no, what happened in your own words?

Anything else you would like us to know about what brought you here? _____

Community Integrated Health Services (CIHS)

Cowlitz County Mailing Address: 1128 Broadway, Longview, WA 98632

Grays Harbor County Mailing Address: P.O. Box 178, Hoquiam, WA 98550

Lewis County Mailing Address: P.O. Box 579, Centralia, WA 98531

Pacific County Mailing Address: 308 Commercial Street, Raymond, WA 98577

Phone: (360) 261-6930 or (855) 303-4834 | **Fax:** (360) 748-4480 or (844) 554-3370

Website: www.cihealthservices.com

For Office Use Only:

Date Received:

Received Via: Fax In Person Mail Other: