



**Physicians'
HEALTH
Program**

The Foundation of the Pennsylvania Medical Society

Pennsylvania PHP Discharge Information
 400 Winding Creek Boulevard • Mechanicsburg, PA 17050
 Telephone: (717) 558-7819 • Fax Line: (855) 933-2605
 Message Line: (717) 558-7817 • Toll Free: (866) 747-2255

Please FAX to PA PHP at (855) 933-2605 prior to discharge.

Patient Name: _____

Facility Name: _____

Admission Date: _____ (Tentative) Discharge Date: _____

Diagnoses: _____

ADHD Confirmed with neurocognitive testing Date of testing: _____

Treatment Recommendations:

Individual Therapist: _____
 Reason: _____

Group Therapist: _____
 Reason: _____

Medication Management Psychiatrist: _____
 Reason: _____

Other _____

Other Recommendations:

Drug Testing _____
 12-Step Meetings _____
 Work Restrictions _____
 Explain: _____

Other _____

Meds on Discharge _____

MAT (Vivitrol, Naltrexone, Buprenorphine, etc.) _____ Recommended Duration _____

 Therapist Name Therapist Signature Date

 Medical Director Name Med. Director Signature Date