

Prospective patient,

I look forward to meeting with you at your upcoming appointment! If you've never received mental health treatment before, it can seem intimidating at first, but my goal is to make you feel at ease. Before we meet, I'd like to orient you to some of the logistics of mental health treatment as my patient.

An initial psychiatric evaluation will last about 60 minutes. I will ask you questions about both your current and past mental health symptoms, your medical history, your life experiences, and more. Then we will discuss my professional opinion regarding diagnosis, treatment options, and the frequency of follow-up appointments (if needed). If I am unable to assist you, I will offer alternative options for seeking care.

I request that you provide me with certain information before your first appointment. Please fill out this intake packet PDF and return it via the patient portal. I find that patients who take time to complete it get the most out of the first appointment, as it allows us to focus on the most important aspects of your mental health. If you have records from previous mental health treatment, or results from psychological testing, please send these ahead of time if possible.

I understand that there are times when you must miss an appointment due to emergencies/obligations for work or family. You will not be charged for a single late cancellation, provided that you contact me to cancel at least 24 hours before your appointment starts. However, last minute cancellations may prevent another patient from getting much needed treatment. If multiple appointments are not canceled at least 1 full week in advance, you will be charged a late cancellation fee of \$75. Cancellations within 24 hours of an appointment's starting time always incur a \$75 cancellation fee. Please note that this cancellation policy is more stringent than Emmaus Health Partners' policy.

I perform psychiatric evaluations for diagnostic and treatment purposes. I do not perform psychiatric evaluations for other purposes (e.g. evaluations for disability benefits, or determination of one's suitability for a surgical procedure, etc.) on unestablished patients. If you desire these evaluations after you have been in treatment for an extended period, I will consider those then, but I reserve the right to refuse such requests. Similarly, I require that you employ independent forensic psychiatric services should such an evaluation or testimony be required. While I acknowledge this may present inconveniences, I ultimately seek to protect the therapeutic relationship that I have with my patients. Serving a dual role of both treating and forensic psychiatrist may harm this relationship and jeopardize treatment, even in ways that are not foreseeable.

Attaining and maintaining mental wellness is a journey, oftentimes a difficult one. Treatment requires effort from both the clinician and the patient. Together we will come to a consensus on what you hope to achieve out of treatment. Once we have agreed on goals

for treatment, I expect that you will work towards them. Occasional setbacks are an expected part of forward progress; however, repeated failures to work toward mutually agreed upon goals are not conducive to treatment success. Continued lack of engagement in treatment represents a break in the patient-physician relationship and may result in termination of treatment.

Mental health is an important aspect of our lives. I am honored that you have come to me to improve your wellbeing. I look forward to helping you build a fuller life.

Eric Collins, MD

Your signature below shows that you have read and agree to the policies outlined above.

Patient Name:

Signature:

Date:

By signing above, you consent to use an electronic signature to acknowledge this agreement.

Psychiatric Medication History

Start in the “ever taken” column by marking the treatments you have received in your lifetime. Complete the rest of the questions for each marked treatment. *This information is important as it will help us determine the course of action in treating your symptoms.*

Medication		Ever taken?	Last taken? (month/year)	Taken as directed for >6 weeks?	Highest dose/level	Did it help?		Side effects?
						Yes	No	
SSRI	Fluoxetine (Prozac)							
	Paroxetine (Paxil)							
	Sertraline (Zoloft)							
	Citalopram (Celexa)							
	Escitalopram (Lexapro)							
	Fluvoxamine (Luvox)							
SNRI	Duloxetine (Cymbalta)							
	Venlafaxine (Effexor)							
	Desvenlafaxine (Pristiq)							
	Milnacipram (Savella)							
	Levomilnacipram (Fetzima)							
Other	Vilazodone (Viibryd)							
	Vortioxetine (Brintellix)							
	Bupropion (Wellbutrin)							
	Mirtazapine (Remeron)							
	Nefazodone (Serzone)							
	Trazodone (Desyrel)							
	Agomelatine (Valdoxan)							
TCA	Clomipramine (Anafranil)							
	Imipramine (Tofranil)							
	Amitriptyline (Elavil)							
	Desipramine (Noripramin)							
	Nortriptyline (Pamelor)							
	Trimipramine (Surmontil)							
	Amoxapine (Asendin)							
	Maprotiline (Ludiomil)							
	Doxepin (Sinequan)							
	Protriptyline (Vivactil)							
MAOI	Phenelzine (Nardil)							
	Tranylcypromine (Parnate)							
	Isocarboxazid (Marplan)							
	Selegiline (Emsam patch)							

Medication		Ever taken?	Last taken? (month/year)	Taken as directed for >6 weeks?	Highest dose/level	Did it help?		Side effects?
						Yes	No	
Antipsychotics	Aripiprazole (Abilify)							
	Quetiapine (Seroquel)							
	Olanzapine (Zyprexa)							
	Risperidone (Risperdal)							
	Paliperidone (Invega)							
	Ziprasidone (Geodon)							
	Clozapine (Clozaril)							
	Asanapine (Saphris)							
	Lurasidone (Latuda)							
	Haloperidol (Haldol)							
	Thioridazine (Mellaril)							
	Chlorpromazine-Thorazine							
	Perphenazine (Trilafon)							
	Trifluoperazine (Stelazine)							
Stabilizers	Lithium salts (Lithium)							
	Valproic acid / Depakote							
	Lamotrigine (Lamictal)							
	Carbamazepine (Tegretol)							
	Oxcarbazepine (Trileptal)							
Stimulants	Amphetamines (Adderall)							
	Dexamphetamine -Dexedrine							
	Dexmethylphenidate-Focalin							
	Lisdexamfetamine-Vyvanse							
	Ritalin/concerta							
	Modafinil (Provigil)							
	Armodafinil (Nuvigil)							
	Atomoxetine (Strattera)							
Other Agents	Buspirone (Buspar)							
	Liothyronine (Cytomel)							
	Gabapentin (Neurontin)							
	Pramipexole (Mirapex)							
	Omega 3 (Fish oil)							
	Methylfolate (Deplin)							
	Folate – Folic acid							

	Testosterone/Androgel							
	Estrogen							
	Medication	Ever taken?	Last taken? (month/year)	Taken as directed for >6 weeks?	Highest dose/level	Did it help?		Side effects?
						Yes	No	
	Topiramate (Topomax)							
	SAMe							
	Roprinole (Requip)							
	Inositol							
	Varenicline (Chantix)							
	Clonazepam (Klonopin)							
Benzodiazepines	Alprazolam (Xanax)							
	Lorazepam (Ativan)							
	Diazepam (Valium)							
	Temazepam (Restoril)							
	Oxazepam (Serax)							
	Chlordiazepoxide (Librium)							

Treatment	Ever received?	Last received/used? (month/year)	Type of stimulation		# of sessions			Did it help?		Side effects?
			1 side	2 sides	<6	6-12	>12	Yes	No	
ECT										
TMS										
t-DCS										
VNS										
DBS										
Ketamine infusion										
S-Ketamine intranasal										
Light therapy										
Psychotherapy (CBT)										
Psychotherapy (DBT)										
Psychotherapy (Other)										

Source: University of Pennsylvania, School of Medicine. Developed by Mario A. Cristancho, MD, and John O'Reardon, MD (2014)