

# Newport Hospital

Lifespan. Delivering health with care.

## Adult Partial Hospitalization Program

Telephone: 401-845-1910 • Fax 401-848-6080

### Referral Guidelines

- The patient must be experiencing significant impairment in multiple areas of daily life
- The patient must be present with acute symptoms of psychiatric illness that are expected to improve with short-term psychotherapy and/or pharmacologic intervention
- Although the patient may experience suicidal or homicidal ideation, he/she must not be in imminent risk of acting on these thoughts
- The patient must be able and willing to seek emergency assistance in the event of a potential crisis outside the program hours
- The patient must be able and willing to participate in group therapy

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Home) (Work) (Cell)

Primary Insurance \_\_\_\_\_ Policy # \_\_\_\_\_ Subscriber Name \_\_\_\_\_

Secondary Insurance \_\_\_\_\_ Policy # \_\_\_\_\_ Subscriber Name \_\_\_\_\_

Patient to be admitted from \_\_\_\_\_  
*(Attach D/C/ summary, medication list, and any other pertinent information if available)*

Reason for referral to PHP (and diagnosis if known): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Desired PHP admission date: \_\_\_\_\_ PHP staff to contact patient?  Yes  No

Current Psychotropic Medications (if known): \_\_\_\_\_

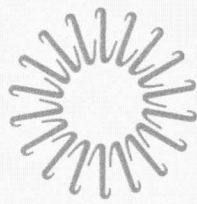
Outpatient Therapist \_\_\_\_\_ Outpatient Psychiatrist \_\_\_\_\_

*Thank you for your referral • We value the opportunity to participate in the care of your patient*

Referring Provider: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ Office Fax/Email: \_\_\_\_\_



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### **Adult Partial Hospitalization Program**

Borden - Carey Building • Suite G-20

19 Friendship Street

Newport, RI 02840

401-845-1910

### **Directions to Newport Hospital Adult Partial Hospitalization Program**

***Use the Borden-Carey Building entrance at 19 Friendship Street. Parking is free. If you need assistance with these directions please contact us at 401-845-1910.***

**From North of Aquidneck Island:** Take Route 24 South to its end at Route 114 South (West Main Road) and stay on this road through the towns of Portsmouth and Middletown. See “Entering Newport” sign and proceed straight through intersection onto Broadway. Follow Broadway approx. 1/2 mile and turn left onto Friendship Street, and then turn into the Newport Hospital / Borden - Carey Building parking lot. Entrance is at the rear of the building. Come in through the sliding glass doors and proceed down the hallway to your left. The entrance to Suite G-20 is on your right.

**From South of Aquidneck Island:** Take Route 95 North to exit 3A. Bear right at the end of the ramp onto Route 138 East. At the intersection of Route 1 turn left onto Route 1 North. Take the Jamestown/Newport Bridge exit on the right. Cross the Jamestown (no toll) and Newport (toll or Easy Pass) bridges. At the end of the Newport Bridge take the second exit on the right (Admiral Kalibus Road) and follow ramp to first traffic light. Turn left at light. Continue straight through another light, at next light turn right onto Broadway. Follow the directions above from Broadway.

### **Please be sure to bring the following with you:**

- Photo ID
- Insurance Card(s)
- Current medications list with dosage information
- Lunch or money to purchase lunch in the Newport Hospital Cafeteria

# **REFERRAL FAX LINE: 401-848-6080**