



MOST INSURANCES ACCEPTED

PROGRESSIVE
COUNSELING CENTER

Addiction Recovery & Counseling Specialists™

BOARDMAN, OHIO
REFERRAL FAX LINE
FAX: 330.629.2199
Phone: 330.629.2434

www.progressivecounselingcenter.com

Addiction Assessment • Addiction Treatment/Recovery Referral

I believe the patient I'm referring is a motivated individual who expresses a willingness to participate in a highly-disciplined comprehensive and active Addiction Recovery Treatment Program which may include any or all of the following: Physician Managed Buprenorphine medication, mandatory individual/group counseling sessions and regular participation and attendance in a 12-step program (Alcoholic Anonymous AA or Narcotics Anonymous (NA)).

REFERRING PHYSICIAN INFORMATION:

Physician Name: _____

Office Contact for this Referral: _____ Ext _____

Phone _____ Fax _____

Address _____

City _____ State _____ Zip _____

NPI# _____ UPIN#: _____

PATIENT INFORMATION:

Patient Name: _____ Phone: _____

Has the patient been treated for Addiction Issues? ____ yes ____ no

If yes, Facility name: _____

Has this patient ever been dismissed by another physician? ____ yes ____ no

If yes, the Physician's name: _____

REASON FOR REFERRAL AND PATIENT INFORMATION NEEDED FOR ASSESSMENT:

REASON FOR REFERRAL
___ Opioid Medication Addiction
___ Alcohol Addiction
___ Substance Abuse/Addiction:
Type: _____
Other: _____

PLEASE ATTACH INFORMATION WITH REFERRAL FORM
___ Demographic Form
___ C-9 for Worker's Compensation
___ Current Medication List
___ Any previous or recent lab test/report/results (i.e. Liver function study, UDS, etc.)

PROGRESSIVE Counseling Center

1025 Boardman-Canfield Road | Youngstown, OH 44512

PHONE: 330.629.2434 | FAX: 330.629.2199

Most Insurances Accepted | Private/Self Pay Welcome



THANK YOU FOR YOUR REFERRAL!



PROGRESSIVE
COUNSELING CENTER

Addiction Recovery & Counseling Specialists™