



EPIC Empowering People in the Community

Butler County Location
125 West New Castle Street
Butler, PA 16001
(724) 452-4453, ext. 1961
(724) 841-0855 Fax

Beaver County Location
191 S Park Street
Rochester, Pa 15074
724-888-2941
724-709-7068 Fax

Psychiatric Rehabilitation Services Referral

___ Butler County ___ Site Based ___ Mobile

___ Beaver County ___ Site Based ___ Mobile

Please return completed referral signed by LPHA agent and current psychiatric evaluation. Referrals can be emailed to: intakes@gladerun.org.

For inquiries please call 724.452.4453 ext1084

Client Name: _____

Referral Date: _____

Address: _____

Phone: _____

Cell Phone: _____

MA ID # _____

SS #: _____

DOB: _____ Age: _____ Gender: _____ Race: _____

Insurance: _____ Insurance ID# _____

Referral Source: _____ Contact Phone #: _____

Reason for Referral:

Diagnosis: _____

Clinical Syndromes: _____

Specifier: _____

Personality Disorders/Intellectual Disabilities: _____

Specifiers: _____

Medical Conditions: _____

Stressors: _____



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Please describe specific functional impairments that interfere with or limit role performance in the domains listed below. (for example: unable to maintain stable housing, lacks social supports, poor communication skills, poor coping skills, unable to maintain employment)

Living: _____

Socializing: _____

Wellness/Illness

Management: _____

Employment: _____

Education: _____

Current Medication: _____

Psychiatric Admissions (current/past/location/date): _____

Drug/Alcohol History: _____

Legal History: _____



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Special Accommodations: _____

Current Mental Health Services: (type/ agency/ contact information):

Emergency Contact Name/Number: _____

PCP Name: _____ **Phone:** _____

Address: _____

LPHA Recommendation for Psychiatric Rehabilitation Services:

LPHA Agent Name: _____ **MD** __ **CRNP** __ **PCP** __ **PA** __

LPHA Agent Signature: _____ **Date:** _____

LPHA Address: _____ **Phone:** _____

LPHA's NPI# _____ **LPHA's Promise #** _____