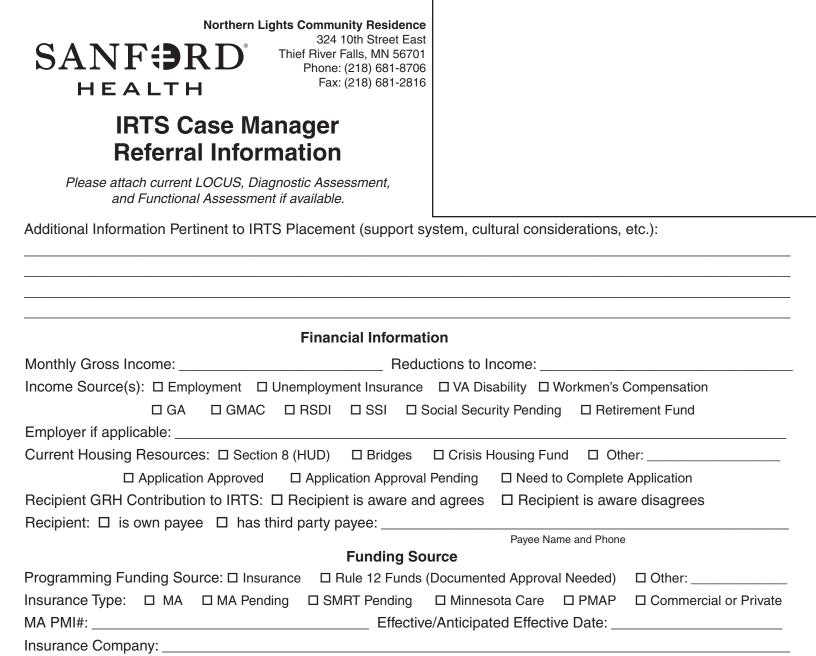
	ern Lights Community 324 10th Thief River Falls,	Street East		
HEALTH	1 110116. (210			
IRTS Case				
Referral Inf	ormation			
Please attach current LOCUS and Functional Asses		ent,		
Date:				
Referral Source Name:			Phone:	
Referring Agency:			Fax:	
Case Manager if different than re	ferral source:			
County of Responsibility:			Phone:	
	Recip	ient Information		
Recipient Name:			DOB:	
Recipient Name:		Last	000	
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Gender:  Male  Female  Ma	-	-	•	
Home Address:  Current	Last Known D Hor	meless 🛛 Unknown	SSN:	
Street	Apt	City	State	Zipcode
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Current Placement:  Home Altru Hospital CBHH:	Sanford TRF Inpatie	ent D Prairie St. John's	□ Red River Behavioral Hea _ □ Other Inpatient:	alth
Current Placement:  Home Altru Hospital Foster/Gro	Sanford TRF Inpatie	ent D Prairie St. John's	□ Red River Behavioral Hea _ □ Other Inpatient: _ □ Other:	alth
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Current Placement:  Home Altru Hospital Foster/Gro Current Placement Contact: Legal Status: Voluntary	Sanford TRF Inpatie	ent	□ Red River Behavioral Hea _ □ Other Inpatient: _ □ Other: _ Phone:	alth
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## THE FOLLOWING INFORMATION WILL BE REQUIRED PRIOR TO INTAKE:

Copy of the court findings, if a recipient is on a full commitment or stay of commitment, which indicate the type of commitment as well as a copy of the provisional discharge;

Copy of the completed NLCR "Preadmission Medical and Physical Requirements" form or equivalent current physical exam (within 30 days), to include medical history, immunization record, and a statement the individual is free of communicable disease, signed by a physician or qualified nurse practitioner; and

Three day supply of medication and current prescriptions for all medications or confirmation from the local pharmacy that the prescriptions have been received and the pharmacy is able to fill the prescriptions, (NLCR uses Thrifty White Drug in Thief River Falls, 218-681-3132).

All residents must receive a baseline TB screening within 72 hours of admission or within 3 months prior to admission. Baseline TB screening consists of three components: (1) assessing the patient's risk factors for TB, (2) assessing for current symptoms of active TB disease, and (3) testing for the presence of infection with Mycobacterium tuberculosis by administering either a two step TST or single TB blood test.

Sanford Health Referral Documents