

# REFERRAL FOLLOW-UP FORM

- INTERVENTION  MPowerment  Wellness Center  
 Outreach  CTRS / HIV SCREENING  
 SGS  HIV Partner Services  
 Risk Mgmt  Other \_\_\_\_\_

Referring Agency \_\_\_\_\_

*Affix CT sticker or write P number*

Client Name:	Client Phone:	Client UIN: _____
		F <sup>1</sup> F <sup>3</sup> L <sup>1</sup> L <sup>3</sup> MMDDYYYYG **
	<b>Referral # 1</b>	<b>Referral # 2</b>
	____/____/____ Date issued      Worker #	____/____/____ Date issued      Worker #
	<b>Referral # 3</b>	
	____/____/____ Date issued      Worker #	
Referral Type Code		
Receiving Agency Name, Phone/FAX		
Follow-Up Attempts	<b>Referral # 1</b>	<b>Referral # 2</b>
	<b>Referral # 3</b>	
<b>1<sup>st</sup> Attempt</b>	Date      Worker #	Date      Worker #
	Verify      Outcome	Verify      Outcome
<b>2<sup>nd</sup> Attempt</b>	Date      Worker #	Date      Worker #
	Verify      Outcome	Verify      Outcome
<b>3<sup>rd</sup> Attempt</b>	Date      Worker #	Date      Worker #
	Verify      Outcome	Verify      Outcome
Comments		
Referral Closing*	____/____/____ Date      Final Outcome	____/____/____ Date      Final Outcome
	____/____/____ Date      Final Outcome	

**Verify Codes**

- V1 Client – Phone contact
- V2 Client – In-person contact
- V3 Receiving Agency contact
- V4 Client – Other contact (email)

**Outcome Codes**

- O1 Pending
- O2 Confirmed – accessed (attended first appt.)
- O3 Confirmed – did not access
- O4 Lost to follow-up
- O5 No follow up

**If client is HIV+ and a referral to medical care was not made, please indicate reason:**

- Client already in care
- Client declined care
- Other: \_\_\_\_\_

**\*\* Client UIN Code:**

- F1:** First letter of first name
- F3:** Third letter of first name
- L1:** First letter of last name
- L3:** Third letter of last name
- MMDDYYYY:** Birthdate
- G:** Gender (1-male, 2-female, 3-transgender)

\*All referrals should be closed as **Lost to Follow-up** after 60 days if there is no confirmation by client or agency that client accessed the service.

**Keep a copy of this form on file in your office and mail in the original.**