

SOS SERVICE
Nepean Blue Mountains PHN
GP Referral Cover Form & Checklist

Please complete & fax this form to the SOS Provider

GP to contact NBMPHN for an SOS Referral Code & assistance in finding an SOS Service Provider.
Appointments with the SOS Service Provider will be scheduled within 72 hours of referral being made.

GP Referral Cover Form & Checklist is to be completed in conjunction with GP Referral Patient Detail Form.
Completed forms should be sent directly to the SOS Service Provider.
GPs are not required to forward any paperwork to the NBMPHN.

MONDAY TO THURSDAY REFERRAL HOURS ARE BETWEEN 9AM - 5PM
FRIDAY REFERRAL HOURS ARE BETWEEN 9AM - 4PM

Phone: 1800 223 365

SOS REFERRAL CODE:	Date:	Time:
GP Information:		
Name:		
Phone:		
Fax:		
SOS Provider Information:		
Name:		
Phone:		
Fax:		

GP Referral Checklist

- ☐ Patient meets eligibility criteria
- ☐ Risk Assessment completed (+ copy provided to patient for SOS Provider)
- ☐ SOS Consumer Information Brochure given to patient
- ☐ Patient registered with ATAPS Suicide Support Line
- ☐ Crisis Support Information given to patient
- ☐ SOS GP Referral Patient Details Form completed (+ copy provided to patient for SOS Provider)

Is the consumer currently receiving psychological services under:

ATAPS Yes ☐ No ☐ OR Medicare Yes ☐ No ☐

NB: This form is to be faxed with the GP Referral Patient Detail Form to the SOS Provider