

**NOW OFFERING
ADULT IOP**



THE PINES AT HOLLY HILL PHP/IOP REFERRAL FORM

PLEASE FAX TO 919.231.5302 OR SCAN + EMAIL TO YOUR COMMUNITY LIAISON

Community Liaison Contact Information on Reverse Side

Referral Date: _____

Program of Interest (Circle One):

ADULT PHP (Psychiatric + Dual-Diagnosis Tracks)

ADULT IOP (Psychiatric + Dual-Diagnosis Tracks)

Referred By (Name & Agency): _____

Contact Number: _____ Fax Number: _____

Patient Name: _____ Patient DOB: _____ Gender: _____

Patient Telephone: _____

Patient Address/Mailing: _____

Insurance Company, Policy Holder & Policy Number (can include copy of front/back insurance card):

Does Patient Have Reliable Transport (SELF or OTHER)? _____

Current Symptoms:

Current Medications:



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Community Liaison Contact Information on Reverse Side

Holly Hill Hospital's Community Liaisons serve as your one point-of-contact for clinical communications, scheduling admissions and assessments, requesting discharge paperwork and more.

Simply complete this form, scan and email to your Community Liaison.

COMMUNITY LIAISON CONTACT INFORMATION:

ASHLEY ORLOVICH, Director of Business Development

Ashley.Orlovich@UHSInc.com (919) 817-9149

LESLIE CENEZY, Triangle + Central NC

Leslie.Cenezy@UHSInc.com (919) 436-5703

JESSICA BERRYMAN, Western NC

Jessica.Berryman@UHSInc.com (919) 270-9947

PATRICK BATES, Military + Eastern NC

Patrick.Bates@UHSInc.com (919) 621-6799

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