

Referral form for Primary and Community Care Providers (PCP) to access Foundry services

Fax referral to 604-746-7399		More info at: foundrybc.ca/abbotsford			
NAME:	DOB:	: PHN:			
Phone #: Alt. p	hone #:	(OK to leave mes	ssage?	ΥN
PCP:		Length of time	as your patient	t:	
Where did you hear about Foundry	/?				
SERVICES REQUESTED Primary Care: Mental Health m	nanagement (mild to moderate issu	es not responding to	your initial	Tx)
Counselling: Walk-in Counsel	lling (Solutior	n focused, 1 - 2	essions)		
Sexual Health: (Please indica Contraception/IUD	,	anagement and	F/U	PrEP	
Gender Affirming Care					
Social Services: Poverty redu	ıction, housin	g, food security			

Please attach the following to your referral:

- Services/Providers already accessed by your patient
- Medication trials to date

The following programs can be accessed directly by PCP's

Peer Support: Youth and adult peers with lived experience

- Dr. Agbahovbe (adolescent Psychiatrist): <u>Fax</u> a referral letter to 604-776-2121 (GP/NR referral only)
- IMPACT: Drug/EtOH counselling for youth and their adult supports ph. 604-778-347-8664
- START: Short Term Assessment Response Team, ages 6 18 ph. 604-743-0765
- EPI: Early Psychosis Intervention Program, ages 13 30 ph. 1-866-870-7847
- CYMH: Child and Youth Mental Health, ages 0 18 ph. 604-870-5880
- AMH: Adult Mental Health, ages 19 and up ph. 607-870-7800
- Eating Disorders: Adults ph. 604-870-7800 Adolescents, age <19 ph. 604-870-5880

Note: Adolescent Day Treatment Program (ADTP), ages 13 – 18 via CYMH only Information will be shared with the referring PCP upon patient consent