



Mental Health - Care & Research  
Santé mentale - Soins et recherche

Substance Use & Concurrent Disorders Program  
RAAM Clinic Alcohol and Opioid Services  
The Royal, 1145 Carling Ave., Ottawa ON K1Z 7K1

Phone **613.722.6521** Fax **613.715.5802**  
ext. **6508** for RAAM Alcohol (both services)  
ext. **6224** for RAAM Opioid

Place patient sticker here

## REFERRAL FORM

Rapid Access Addiction Medication (RAAM) Clinic Alcohol and Opioid Services  
Please fax referral form to 613.715.5802

### PATIENT INFORMATION

MRN # \_\_\_\_\_ OHIP # \_\_\_\_\_

Patient name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Date of referral: \_\_\_\_\_ Referring clinician: \_\_\_\_\_

Referring clinician contact information: \_\_\_\_\_

#### PLEASE NOTE

- Patients specifically looking for help with chronic pain management concerns should **NOT** be referred to the RAAM Clinic. Please direct them to their Primary Care Provider or their medication prescriber.
- Clients visiting RAAM **must be ambulatory and not in need of immediate hospitalization**
- Upon referral, please provide patients with a RAAM Patient Information Sheet and advise them to walk in anytime **Monday to Thursday between 10 AM and noon or 1 PM and 2 PM** (closed on statutory holidays)

### REASON FOR REFERRAL (Check all that apply)

#### RAAM Alcohol

- Diagnosed alcohol use disorder
- At risk of alcohol withdrawal
- Other: \_\_\_\_\_

#### RAAM Opioid

- Diagnosed opioid use disorder
- At risk of alcohol withdrawal
- Opioid overdose follow-up
- Other: \_\_\_\_\_

### CURRENT MEDICATIONS (Related to alcohol/opioids)

Medication	Dose	Date/Time of Last Dose	Prescription on Discharge <i>(if applicable)</i>
<input type="checkbox"/> Buprenorphine/naloxone			
<input type="checkbox"/> Diazepam			
<input type="checkbox"/> Lorazepam			
<input type="checkbox"/> Other: _____			

Please fax to 613.715.5802 and attach any additional relevant documentation.