

Case Notes Template

Use this form to document each encounter with the patient, as case notes. Keep this form in the patient chart.

At the time of reporting: add up the total number of encounters for each "Service Type" to date and enter into database

Patient name:	Hep C Program patient ID:	Agency patient ID:	
Date of encounter:	Type of encounter: <input type="checkbox"/> Call <input type="checkbox"/> Email <input type="checkbox"/> Text <input type="checkbox"/> In-person		
Service type: <input type="checkbox"/> Accompaniment to appointments <input type="checkbox"/> Treatment Adherence Support <input type="checkbox"/> Reminder (call, letter, text, email, telegram) <input type="checkbox"/> Medication/Pharmacy Coordination <input type="checkbox"/> Alcohol/Drug Counseling <input type="checkbox"/> Other meeting with patient			
Patient stage in care plan: <input type="checkbox"/> Assessment <input type="checkbox"/> Linkage-to-care <input type="checkbox"/> Medical eval <input type="checkbox"/> Treatment prep <input type="checkbox"/> Treatment <input type="checkbox"/> Post treatment			
Notes:			
If the encounter included a medical visit:			
Purpose of medical visit:		On treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No <small>*Complete Treatment Planning Form before starting treatment and review at each visit while on treatment</small>	
Instructions from medical provider:			
Next visit planning			
Date:	Type: <input type="checkbox"/> Visit with medical provider <input type="checkbox"/> Visit with patient navigator	Reminder needed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Accompaniment needed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Planning notes for next visit:			