# **Case Presentation Template**

Stratis Health Opioid Addiction in Rural (SOAR) Education and Treatment ECHO
Kurt DeVine, MD, and Erin Foss, RN

Your Name:

*Patient Information*

Gender:       Age:       Education Level:

Patient Diagnosis: [ ] SUD [ ]  On controlled substance Other:

Patient Synopsis (Brief)- History of Present Concern:

Pertinent Medical History:

Mental Health Diagnoses: [ ]  Anxiety [ ]  Depression [ ]  Bipolar Disorder [ ]  Schizophrenia

 [ ]  Other:

Substances Used: [ ]  Opioids [ ]  Alcohol [ ]  Marijuana [ ]  Methamphetamine

 [ ]  Cocaine [ ]  Benzodiazepines [ ]  Other:

Current Medications:

PMP Reviewed: [ ]  Yes [ ]  No Results if yes:

Most Recent Urine Drug Screen Results (if pertinent):

Social History:

Family History of Substance Use Disorder(s):

Legal Issues:

Treatment History (If applicable):

What is the main question about the patient? Other drug story/patient background information.

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