WHO CAN SUBMIT A CAMH REFERRAL?

- Most **Mental Health Services** require a physician or nurse practitioner referral.
- A physician referral is preferred for the following services:
  - Geriatric Mental Health Services (including Memory Clinic)
  - Schizophrenia Services (STARS)
  - If the patient already has a methadone/suboxone provider or addictions physician involved in their care, that provider will need to fax the completed CAMH referral form.

HOW DO I SUBMIT THE REFERRAL?

- Please fax the completed CAMH referral form to: **416 979-6815**.
  - For **Telepsychiatry**, please fax the completed CAMH referral form to **416 260-4186**.
- To help us provide the best care possible, include relevant documents, such as previous psychiatric consultations or discharge summaries, medication sheets, psychological reports, lab and test results, medical reports and physical findings.

**NOTE:** Youth criminal justice documents are not required as part of the referral. If they are needed, the service will contact the referring provider directly.

If you have questions about the referral process, please call **Access CAMH at 416 535-8501, press 2.**