Clinical Care for Autistic Adults

Initial Visit Patient Profile

Message to patient and family/support team: This document is intended to provide information to help your health care providers get to know you better, help accommodate your needs, and deliver better health care for you. We recommend that you review this information with your doctor during an initial visit.

Patient name:	**Date of visit:**
Patient age:	**Patient DOB:**
Name of person completing form:	**Relationship to patient:**

GUARDIANSHIP INFORMATION (only for patients aged 18 years or older)

Does the patient have a guardian or health care proxy? If yes, complete the information below:

Guardian or health care proxy name:	**Contact information:**

If the guardian has been appointed by the court, a copy of the guardianship should be submitted to the doctor.

PATIENT INFORMATION

Name of the patient's school or day program:
Where does the patient reside?
Date of last neuropsychological evaluation:
Who is on the care team?

BASELINE BEHAVIORS

	Increased?	Decreased?	Unchanged	Need to talk?
Anxiety	yes/no	yes/no		With patient/caregiver
Rituals/routines	yes/no	yes/no		With patient/caregiver
Agitation	yes/no	yes/no		With patient/caregiver
Irritability	yes/no	yes/no		With patient/caregiver
Aggression	yes/no	yes/no		With patient/caregiver
Self-injury	yes/no	yes/no		With patient/caregiver
Hypersexuality	yes/no	yes/no		With patient/caregiver
Stereotypies (repetitive movements/utterances	yes/no	yes/no		With patient/caregiver

LOGISTICS

Does the patient need support with the following (circle yes or no):

Scheduling appointments: yes / no	**Finding transportation: yes / no**

(If you need more space for anything below, please ask for an additional blank page.)

MEDICATIONS

List current medications/dosages:	**List past medications/dosages and their effect:**

COMMUNICATION

How should we greet the patient?

What is the best way for us to prepare the patient for tests and other initial visit tasks?

Is there anything that the patient will not tolerate?

How will the patient let us know if they are in pain?

CAREGIVER NEEDS

How can the team support the patient's caregiver (if applicable)?