

Millennium Community Services, LLC
448 36th Ave NW, Suite 101,
Norman, OK 73072-4743
Office: 405-627-0276 Fax: 405-573-0404
Client Information

REFERRAL SOURCE / REASON

Referred Date: 2019-03-06 **Referred By:** GREAT SALT PLAINS HEALTH CENTER, INC. **Phone:** 580-596-2800

Reason For Referral:

She was referred for medication due to depression and anxiety.

Initial Intake Information **Intake Date:** 03/08/2019 @ 14:31 **Staff:** Beth Pidcock

IDENTIFYING INFORMATION

Name: Adams, Helen (60164)

Address: 4121 S Van Buren Unit 951, Enid, OK 73701

Home Phone: 580-278-5676

Work Phone:

Email:

Place of Birth: New York New York

SSN: 060-58-1228

DOB: 08/03/1964

Height: 5 ft. 5.0 in.

Weight: 225.0 lbs

Age: 54 **Gender:** F

GUARANTOR INFORMATION

Name: Helen Adams

Address: 4121 S Van Buren Unit 951, Enid, OK 73701

Home Phone: 580-278-5676

Work Phone:

Email:

Employer:

SSN: 060-58-1228

DOB: 08/03/1964

IN CASE OF AN EMERGENCY (Parent/Guarantor if client is under 18 or under legal guardianship)

Name:

Phone:

Address:

Relationship:

Special Instructions:

Health Care Information / Resources

Primary Care Physician: LINDSAY GARINGER

Phone: 580-233-2900

Address: 231 S 30TH ST, ENID, OK 737016455

Hospital: ST. MARY'S REGIONAL MEDICAL CENTER

Phone: 580-249-3622

Address: 305 S 5TH ST, ENID, OK 737015832

Insurance

Primary: Medicaid

Policy Number: 008370108

Policy Holder: self

Secondary: Health Home

Policy Number: 008370108

Policy Holder: self

Tertiary:

Policy Number:

Policy Holder:

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REFERRAL SOURCE / REASON

Referred Date: 2019-03-01 Referred By:
Reason For Referral:

Phone:

Initial Intake Information Intake Date: 04/05/2019 @ 17:30 Staff: Jennifer Clark

IDENTIFYING INFORMATION

Name: Little Axe, Slayer (60211)

Address: 1878 12th Ave SE Apt C, Norman, OK 73071

Home Phone: 405-434-6691

Place of Birth: Shawnee

Height: 4 ft. 8.0 in.

Work Phone:

SSN: 448-27-5131

Weight: 80.0 lbs

Email:

DOB: 12/29/2010

Age: 8 Gender: M

GUARANTOR INFORMATION

Name: Slayer Little Axe

Address: 1878 12th Ave SE Apt C, Norman, OK 73071

Home Phone: 405-434-6691

Employer:

Work Phone:

SSN: 448-27-5131

Email:

DOB: 12/29/2010

IN CASE OF AN EMERGENCY (Parent/Guarantor if client is under 18 or under legal guardianship)

Name: Theresa Hooper

Address:

Relationship: mother

Phone:

Special Instructions:

Health Care Information / Resources

Primary Care Physician: No Primary Care Physician reported by Client.

Address: A list of Primary Care Physician was given to Client.

Phone:

Hospital: No Designated Hospital reported by Client.

Address: A list of Hospitals was given to Client.

Phone:

Insurance

Primary: Medicaid

Policy Number: B12448907

Policy Holder: self

Secondary:

Policy Number:

Policy Holder:

Tertiary:

Policy Number:

Policy Holder:

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REFERRAL SOURCE / REASON

Referred Date: 2018-10-24 Referred By:
Reason For Referral:

Phone:

Initial Intake Information Intake Date: 11/01/2018 @ 10:00 Staff: Quinche Tucker

IDENTIFYING INFORMATION

Name: Spearman, Daemon (59098)

Address: 1421 W O K Garriott, Enid, OK 73701

Home Phone: 405-385-1298

Place of Birth: Enid

Height: ft. in.

Work Phone:

SSN: 849-28-4616

Weight: lbs

Email:

DOB: 10/17/2012

Age: 6 Gender: M

GUARANTOR INFORMATION

Name: Daemon Spearman

Address: 1421 W O K Garriott, Enid, OK 73701

Home Phone: 405-385-1298

Employer:

Work Phone:

SSN: 849-28-4616

Email:

DOB: 10/17/2012

IN CASE OF AN EMERGENCY (Parent/Guarantor if client is under 18 or under legal guardianship)

Name: Sloan Spearman

Address: 1421 W. Owen K. Garriot, Enid, OK 73701

Relationship: father

Phone:

Special Instructions: None noted at this time

Health Care Information / Resources

Primary Care Physician: DR. MICHAEL O'QUIN

Address: 3201 N VAN BUREN STSUITE 300, ENID, OK 737031812

Phone: 580-234-7070

Hospital: INTEGRIS BASS BAPTIST HEALTH CENTER

Address: 620 S MADISON STSUITE 209, ENID, OK 737017273

Phone: 580-548-1544

Insurance

Primary: Medicaid

Policy Number: B18507645

Policy Holder: self

Secondary:

Policy Number:

Policy Holder:

Tertiary:

Policy Number:

Policy Holder: