**Helpful Pre-Written Dot Phrases/Text Expanders:**

**Buprenorphine Stable Follow-up:**

- patient is doing well and stable on current dose

- denies significant side effects, withdrawal, or cravings

- meeting personal goals including: \*\*\*

- has the following social/life supports: \*\*\*

- continue current medication regimen

- follow up in \*\*\* weeks

- has emergency naloxone available

**Biopsychosocial Note:**

Physical Health

\*\*\*

Medications

Pharmacy: \*\*\*

Barriers: \*\*\*

Mental Health

Diagnoses: \*\*\*

Current Meds: \*\*\*

Psychiatrist: yes/no \*\*\*

Mental Health or Day Program: \*\*\*

Social Health

Community Supports/Case Management: \*\*\*

Engaged in community outreach program: \*\*\*

Transportation Barriers: \*\*\*

Transportation Company \*\*\* (Please include phone number)

Housing Status: \*\*\*

Food Insecurity: \*\*\*

Income Stability: \*\*\*

Best social support: \*\*\*

**Work Letter:**

To Whom It May Concern

Re: @PATIENTLASTNAME@, @PATIENTFIRSTNAME@

@TODAYDATE@

This patient was seen and cared for in our office today. Please excuse @PATIENTLASTNAME@ from work for this critical medical care.

If you have any questions, please feel free to reach out to my office.

Sincerely,

@ME@