



ST. NORBERT COLLEGE HEALTH AND WELLNESS SERVICES
Main Hall
Phone: 920-403-3266, FAX: 920-403-3099, Email: health@snc.edu

PLAN OF CARE

Name: _____ Date of Birth _____

Diagnosis: _____ Last Date of Assessment: _____

Name and degree of provider directing care: _____

Address: _____

Phone No. _____ Fax No. _____ Contact name: _____

Ongoing treatment: Medication, dosage, duration, etc.

Health and Wellness Services can provide assistance with the Plan of Care in the following ways:

- Provide health assessments and lab tests as per attending medical provider orders (please attach).
- Provide psychotherapy as needed for continuation of care
- Provide ongoing psychological testing relative to the diagnosis
- Maintain contact with medical/psychological provider should complications become evident:

Other:

Signature

Date