



## Pain Treatment Program

### Admissions Agreement for \_\_\_\_\_ (print patient's name)

For those who participate in the Pain Treatment Program, our treatment team is committed to giving patients the highest standard of care, and to helping them achieve the best possible outcomes. As part of this commitment, we have developed this Admissions Agreement to ensure that both the patients and the team share the same goals, and have a common understanding of how to reach them.

#### Please review, and sign below:

In applying for admission to the Pain Treatment Program (PTP), I understand and agree to the following:

- **The PTP is an active program whose primary focus is rehabilitation.** As a participant, I will fully engage in all program activities.
- **The PTP is located on an inpatient psychiatric unit in the hospital.** I will follow all rules and regulations of the unit, including the smoke-free policy.
- **All of my current medications will be reviewed and may be subject to change or discontinuation;** new medications are likely to be added.
- **The PTP has two parts: inpatient and day hospital.** I will follow the team's recommendations regarding the timing of my transitions to the day hospital, and subsequent discharge home.

My signature below indicates my understanding of and commitment to the above statements:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***This completed form must be returned to the Admissions Coordinator prior to admission.***