

P.A.L.S. BEHAVIOR MANAGEMENT DAY PROGRAM

CLIENT PROFILE SHEET

Start Date: 03/02/15

Name: Michael Bell					
AKA/Nickname: D.O.B. 11/04/88				100	
116147402605	Coo Coo H.				
UCI# 7493685 Soc. Sec.#: Medi-Cal#: Medi-Care#:					
Other Health Insurance:					
Other Health Insurance.				EN	
Marital Status: Single Legal Status: Non-Conserved					
Gender: Male	Language(s): Engl	lish			
Residential I					
Facility Name: Amazing Effor					
Address: 5906 8th Ave.					
City: Los Angeles	State: Ca.	Zip Code: 90043		Physical De	escription
Phone: 323-293-4283	Fax:		Height:	68''	Weight: 144 lbs
			Eyes: Black		Hair: Black
Contact Person(s) & Alternate Phone:			Diagnosis Information		
Tamara Henson (admin) cell 323-236-8523			Mild Intellectual Disability		
Martha Brooks (home Staff)			Suicidal Ideation		
Legal/Other Representative			Psychosis		
Name: N/A			Doctor's Information		
Address:			Name: Dr. Jae S. Chu, M.D. (Primary Psysician)		
City:	State: Ca.	Zip Code:	Address: 12610 S. Western Ave.		
Phone:		Work:	City: Los Angeles Ca. 90047		
			Phone: 818-367-1012		
Phone:			Name: Psychiatrist		
Regional	Center Information	1	Address: 18546 Roscoe Bl.		
South Central Los Angeles Re	egional Center		City: Northridge Ca. 91325		
Address: 2800 S. Western Ave.			Phone: 818-834-5082		
City: Los Angeles	City: Ca.	Zip Code: 90018	Name: (Psychologist)		
Phone: 213-744-7000	Fax:		Address: 4772 Topeka Dr.		
Service Coordinator: Barney	Brown		City: Tarzana Ca. 91356		
Phone: 213-744-7085			Phone: 818-343-3883		
Medical History			Address:		
Commun	icable Condition: N		City:		
Hearing Impairment: N	Visual Imp	pairment: N	Phone:		
Allergies: N	Seizi	ures: N	Behavioral Concerns		
Uses Whe	elchair or Walker:	N	Assaultive: Y		Elopement: N
Additional Comments:			Property Destr	uction: Y	Self-injurious: N
Diet: Regular			Substance Abus	e: Y	AWOL: Y
Likes basketball and football			Program ISP Goals & Objectives		
			See PALS Progress Report		
				On Pro	bation
		Revised 2/2/2019)		

Medical Precautions						
Alcohol, Marijuana, Spray Inhalants abuse						
Client has been known to steal and has possessed weapons in the past						
Asthma						
Med update: 2/2/2019						
Medication	Dosage	Frequency	Purpose			
Loratadine	10mg	QD	Not indicated			
Vitamin D3	1000unit	QD	Not indicated			
Fluticasone Prop	50mcg	QD	Not indicated			
Montelukast Sod	10mg	QD	Not indicated			
Mirtazapine	30mg	QPM	Depression			
Quetiapine	400mg	2 tabs QPM	Psychosis			
Docsuate Sod	100mg	2x daily as needed	Constipation			
Ventolin HFA	90mcg	2 puffs every 4 hrs as needed	Shortness of breath			
Ibuprofen	400mg	every 6 hrs as needed	Pain			

30mg

Temazepam

1 capsule bedtime as needed

Not indicated