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## Check List for SPRAVATO Patients

You can find these forms on our website located in the *forms tab*.

**Prior to your first appointment, we will need the following forms/documents.**

- Copy of your **Driver's License** or State ID
- Copy of the front and back on your **insurance card(s)**
- Spravato Evaluation Packet**
- Rating Scales** (these will be completed for each of your appointments)
  - PHQ-9
  - GAD-7
  - If you have a history of obsessive-compulsive disorder, please complete the **Y-BOC** rating scale *in addition* to the PHQ-9 and GAD-7.
- Release of Information form (ROI)**
  - Please hand-sign the bottom of the release form. It will be used to request your medical history from your previous providers.
  - We will need a separate release form for each provider you would like us to request records from

**If you are identified as a good Candidate for SPRAVATO and have been cleared for treatment we will need the following forms/documents before you are able to begin treatment:**

- Prior Authorization for SPRAVATO treatment from your insurance company:
  - **Note:** our office will complete these forms for you but may require your signature prior to being submitted. These are the forms that you can expect to be completed and submitted for prior authorization and enrollment into the SPRAVATO REMS program.
    - Janssen Care Path SPRAVATO Benefits Investigation Form
    - SPRAVATO REMS Patient Enrollment form
    - Pharmacy enrollment form (varies based on insurance)
- SPRAVATO Consent Form**
- Rating Scales:** your progress will be tracked using these rating scales. While you are in treatment, we will ask you to complete these weekly
  - PHQ-9
  - GAD-7
  - If you have a history of obsessive-compulsive disorder, please complete **the Y-BOC** rating scale *in addition* to the PHQ-9 and GAD-7.

**We understand that this process can be overwhelming for people with depression. You may ask a family member to help you or contact our office and we will answer any questions you have and help you complete this process.**

## **During Your Treatment**

- You will have frequent followup appointments with Dr.Galliano-Pardo to monitor your progress
- **Please let us know about any of the following :**
  - Medication changes (both non-psychiatric and psychiatric)
  - Side effects related to medication changes or treatment
  - Improvements
  - Alcohol/ Drug Intake
  - Any concerns you may have
  - Changes in your sleep pattern
  - Schedule changes
  - New providers
  - Upcoming treatments with other providers
  - Any changes regarding your health
  - Vaccination/ COVID-19 vaccination