#### Video Guidance

Breadcrumbs: Client > Case Management > Service Management > Service Entry

Under the Active Intake program, select RTC Scanned Tx Plan (Initial) or RTC Scanned Tx Plan (Review) as appropriate.

- Find **ACTIVE** Intake Enrollment
- Click Add Event > Click RTC Scanned Tx Plan (Initial)/(Review)

Intake Program (12/17/2018 0	8:00 AM - Curren	<b>t)</b> (3)			Add Event 👻		
Service	Due Date	Scheduled Date	Actual Date	Duration	RTC Discharge/Transfer Summary V2		
Substance Use Assessment	01/24/2022	Scheduled Date		Duruuon	RTC Scanned Tx Plan (Initial)		
PTC Co. Occurino Disensorio			00/17/2021 12:00 AM	00.00	RTC Scanned Tx Plan (Initial) (M)	-	

#### **No-Show Information**

- Do Not Bill: Check this box if the treatment plan was billed on paper or should not be billed through myEvolv
- No Show: Check this box if the service was scheduled and client did not show for appointment
- Attempt to Contact: Complete this field if No Show is Checked
- Reason For: Complete this field if No Show is Checked

	· · · · · · · · · · · · · · · · · · ·		RT	C SCANNED TREATMENT PLAN [ADD]	z / Henney Honorro	x
Cli	ent: Test, Client DOB	: 01/01/1980 ID# 00000002	Intake: 01/01/2018 08:00am			
	Save	Cancel Prin	int 🔻 Form Info			
r		▲ No-Show Infor	rmation			
I	No-Show Information	Do Not Bill	No Show	Attempt to Contact	Reason For	
	Encounter				Q	Q

#### **Encounter Information**

- Person: This field will automatically fill and cannot be changed
- Entered With: This field will automatically fill and cannot be changed
- **Type**: This field will automatically fill and cannot be changed
- Activity Type: Use magnifying glass to make selection
- Language Other Than English: Check this box as necessary
- Client Involved: Uncheck this box as needed

	▲ Encounter Information			
No-Show Information	Person	Entered With	Туре*	Activity Type
Encounter	Test, Client	Agency Placement - 01/01/2018 08:00am Q	RTC Scanned Tx Plan (Initial) Q	code Q
Information	Language Other Than English	Client Involved		
Completed Information				

## Completed Information

- Actual Date/Time: Use Calendar/Clock Icons to complete fields
- **Duration**: Enter total time spent with client
- End Date/Time (System Generated): These fields will automatically calculate after saving
- **Completed By**: This field will automatically populate. Use binoculars to edit if necessary
- Location: Use magnifying glass to make selection

Encounter Information	<ul> <li>Completed Information</li> </ul>			
Completed	Actual Date/Time*	Duration (hh:mm)*	End Date/Time (System Generated)	Completed By*
Information	10/25/2021 🛗 01:12 PM 🥥	HH:MM	۵	Hutchinson, Kathleen Marie
Treatment plan	Location			
Diagnoses	code Q			
T 1 (C 1 1 1				

# Treatment Plan

Click to Upload Document.

- Treatment plans completed on paper can be scanned in
- Treatment plans completed on your computer can be uploaded

Treatment plan	▲ Treatment plan							
Diagnoses	Click to Upload Treat	tment Plan*						
Tasks/Schedules	Click to Upload Document							
		Upload File						
Service Related Encounter	Diagnoses	Scan Document						
Information		Multipage Upload from Scanner						
	Comment Disenses	en file						

## Diagnoses

All current diagnoses entered for client will be listed in this section. If a diagnosis is ended, it will no longer appear on the list.

# How to Enter a Scanned Treatment Plan

Treatment plan	▲ Di	agnoses												
Diagnoses	Curre	nt Diagnos	es on Fil	e										
Tasks/Schedules	Axis	Date	Priority	Priority	Diagnosis	DSMIV	ICD9	ICD10 Code	ICD10 Term	DSM5 Term	GAF	SNOMED	SNOMED Term	WA CGAS Score
Encounter Information Progress Note	1	09/17/2021	1	Primary	PTSD (post-traumatic stress disorder): ICD9: 309.81; ICD10: F43.10; SNOMED: 47505003; DSM4 Term: Posttraumatic stress disorder; DSM5 Term: Posttraumatic stress disorder	309.81	309.81	F43.10	Post-traumatic stress disorder, unspecified	Posttraumatic stress disorder		47505003	Posttraumatic stress disorder	
	1	06/17/2021	1	Primary	Depression; ICD9: 311; ICD10: F32.9; SNOMED: 35489007; DSM4 Term: Depressive disorder NOS; DSM5 Term: Unspecified depressive disorder	311	311	F32.9	Major depressive disorder, single episode, unspecified	Unspecified depressive disorder		35489007	Depressive disorder	

### Service Related Encounter Information

- Program Providing Service: Use magnifying glass to make selection if field is not already filled in
- Facility Providing Service: Use magnifying glass to make selection if field is not already filled in

Tasks/Schedules	▲ Service Related Enco	unter Inform	nation		
Service Related Encounter	Program Providing Service*		Facility Providing Service*		
December Nets	Intake Program	Q	RTC (Lic.# 00001)	Q	

# Progress Note

Enter any additional information in the progress note.

Information	▲ Progress Note
Progress Note	Progress Note
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