

Mental Health Action Plan

Personal Health Record

This action plan is a guide to help you recognize your warning signs and symptoms, and be prepared with actions you should take. You and your specialist should complete this plan together. The three colors (zones), green, yellow and red, help you decide what to do.

Zone	STATUS CHECK	ACTION PLAN	RESOURCES																		
Green	<p>Green means you are doing WELL. Symptoms are STABLE. Your symptoms are stable and under control when:</p> <ul style="list-style-type: none"> Your symptoms are well managed. You are participating in your usual activities and can handle normal stressors. 	<p>Take MEDICATIONS as prescribed:</p> <table border="1" data-bbox="758 505 1528 717"> <thead> <tr> <th data-bbox="758 505 1236 553">Name</th> <th data-bbox="1236 505 1367 553">Dosage</th> <th data-bbox="1367 505 1528 553">Frequency</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name	Dosage	Frequency																<p>24/7 Emergency Resources:</p> <p>911</p> <p>National Suicide Prevention Hotline 1-800-273-TALK (8255)</p> <p>Military OneSource 1-800-342-9647 www.militaryonesource.mil</p>
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Yellow	<p>Yellow means CAUTION. Symptoms have CHANGED. Your symptoms indicate you need to talk with your primary care manager (PCM), therapist, psychiatrist, or support network:</p> <ul style="list-style-type: none"> Your symptoms have increased, such as changes in sleep, and/or appetite, an increase in worry, fear, panic, irritability, or even suicidal thoughts. Your coping skills are not as effective. You have increased alcohol/substance use or relapsed. Other symptoms you are experiencing: _____ 	<p>Provider Visit Information</p> <p>Primary Care Manager: _____ Date: _____ Time: _____</p> <p>Psychiatrist: _____ Date: _____ Time: _____</p> <p>Therapist: _____ Date: _____ Time: _____</p> <p>IOP/PHP: _____ Date: _____ Time: _____</p> <p>Other specialist: _____ Date: _____ Time: _____</p>	<p>Additional Resources</p> <p>National Alliance on Mental Illness (NAMI) 1-800-950-NAMI (6264) www.nami.org</p> <p>National Institute of Mental Health (NIMH) 1-866-615-6464 www.nimh.nih.gov</p>																		
	Red	<p>Red means you need help IMMEDIATELY. You need to be evaluated now if your yellow zone actions have not helped your symptoms improve.</p> <ul style="list-style-type: none"> Your symptoms are unmanageable and may include suicidal or homicidal thoughts, a plan and/or intent. Other symptoms you are experiencing: _____ 	<p>Use Your SUPPORTS Family/Friends/Sponsor: _____</p> <p>MANAGE Your Symptoms Get support • Contact friends and family as needed • Keep medical and therapy appointments • Take medications as prescribed • Get rest • Exercise • Practice meditation • Deep breathing for relaxation • Get proper nutrition • Make a plan and follow it</p>	<p>Locate a TRICARE-authorized provider here: www.tricare-west.com/go/provdnr</p> <p>TRICARE West Customer Service 1-844-866-9378 www.tricare-west.com</p>																	