

Welcome to Talbott Recovery, recognized as a leading drug and alcohol treatment center with over 35 years of providing outstanding clinical programs.

TALBOTT RECOVERY

5448 Yorktowne Drive
Atlanta, GA 30349

Contact us today
(800) 445-4232
www.talbottrecovery.com
to learn more about our drug
counseling facilities.

Transportation

Talbott Recovery can provide transportation from Hartsfield International Airport or from local hotels to the facility for admission.





Our Mission

We are dedicated to compassionately providing comprehensive behavioral healthcare services to patients, families and communities. We are committed to helping people develop the skills necessary to enrich their personal and professional lives.

An Alcohol and Drug Treatment Facility

Who We Treat

Talbott Recovery accepts patients with a dual-diagnosis, such as addiction with a coexisting depression, anxiety, unresolved grief, personality problems, etc. Patients attending our treatment programs have a chemical abuse problem, but we address the whole patient in his/her disease.

We screen the health status of all potential patients to make sure we are the proper facility for care. Assessment involves a review of medical history and records by a member of the medical staff, and an admission screening assessment with our intake department.

Benjamin H Underwood - FACHE Chief Executive Officer/Managing Director

Ben Underwood has been a respected leader in the field of behavioral health and addiction treatment for more than four decades. A graduate of the University of Georgia, Ben began his career in the mid-1960s as Associate Administrator of Atlanta's Northside Manor and served as President and CEO of The Metropolitan Psychiatric Center in Atlanta. He also served as President and CEO of Safe Centers. Ben was instrumental in co-developing and opening the Talbott Recovery Program with G. Douglas Talbott, M.D. Ben Underwood's partnership with Dr. Douglas Talbott resulted in an addiction treatment program that has long been recognized as the gold standard in the treatment of addictive diseases and coexisting psychiatric disorders. His expertise has earned him national acclaim. Ben has served as chairman of the National Association of Addiction Treatment Providers (NAATP) and was awarded the American College of Addiction Treatment Administrator's Outstanding Achievement Award in 1992. On behalf of Talbott Recovery, in 2006 he accepted the prestigious James West M.D. Quality Improvement Award for clinical excellence from NAATP. In 2007, he was awarded the Georgia Hospital Association's (GHA) Chairman's Award, the association's highest honor, for his dedication and professional achievements over the last 40 years in Behavioral Healthcare. In 2011, Ben was awarded the Nelson J. Bradley, M.D. Lifetime Achievement Award during the NAATP Annual Conference in Arizona. He served on the Georgia Hospital Association Board of Trustees for 10 years, is a Fellow of the American College of Healthcare Executives, and is Board Certified in Healthcare Management.



Benjamin H. Underwood, FACHE

*Learn the tools of
Addiction Recovery*

Addiction Treatment Programs

- Adult Program – men & women 26 years & older
- Professionals Program – men & women 26 years & older
- Young Adult Program – men & women 18-25 years*
- Dual Addictions – men & women 26 years & older
- 96-Hour Professionals Assessment – as clinically indicated

For more details on each program, please see the program inserts at the back of this brochure or visit our website at www.talbottrecovery.com.

*Final program assignments are determined by individual patient treatment requirements.



Treatment Philosophy

Our treatment philosophy is based on the American Medical Association's definition of addiction as a chronic, progressive, primary illness affecting the physical, emotional, and spiritual well-being of the individual and the family. Talbott Recovery provides an integrated continuum of care for individuals with addictive disease and/or dual-diagnosis such as addiction with a coexisting depression, anxiety disorder, unresolved grief, personality problems and the accompanying emotional and physical problems. Treatment for addiction is both comprehensive and individualized. Patients and their families participate in psychoeducational and psychotherapeutic groups designed to help them explore addiction and dual disorders as well as the impact these diseases can have on the family. Throughout this process patients attend 12-Step meetings (on and off campus) and family members are encouraged to attend Al-Anon meetings. Our treatment philosophy and practices have grown out of over 35 years of successful treatment in our traditional 90-day programming.

*Treatment is comprehensive
and individualized*

Levels of Care

We stage the intensity of treatment based upon the levels described by the American Society of Addiction Medicine Patient Placement Criteria, Version II, Revised.

Detoxification & Stabilization

Inpatient stabilization is available for patients requiring a more complicated detoxification and/or behavioral containment to interrupt the downhill spiral of his/her addiction.

Partial Hospitalization Program (PHP with Recovery Residence)

Following admission or transfer from detox and stabilization, each patient undergoes a thorough evaluation if he/she has not obtained an evaluation previously. The evaluation assesses the patient's physical, psychiatric, psychological, social, spiritual, and family needs to determine the most appropriate level of care.

Mirror Image (with Recovery Residence)

After completing the partial hospitalization phase of treatment, patients are transitioned to Talbott Recovery Mirror Image phase. Extended Mirror Image may be recommended for patients when indicated.

The Talbott Treatment Process

96-Hour Professionals Assessment

If clinically indicated, prior to admission a 96-Hour Assessment may be recommended to help facilitate decision making by prospective patients, family members and referents. The evaluation assesses the patient's physical, psychiatric, psychological, social, spiritual, and family needs to determine the most appropriate level of care. The multi-disciplinary assessment team includes:

- Attending Physician
- Psychiatrist
- Clinical Psychologist
- Internal Medicine Specialist
- Addiction Medicine Specialist
- Assessment Coordinator

The team may also include a pain specialist (if indicated), a neurologist, a behavioral medicine specialist or a sexual boundaries specialist as needed. A fifth day may be required for any additional evaluations that may be necessary.

Each Assessment includes:

- Internal medicine evaluation / physical exam
- Psychiatric evaluation
- Addiction medicine evaluations
- Bio-psychosocial self-assessment
- Laboratory work and drug screens
- Comprehensive psychological testing
- Extensive neuropsychological testing

*Physical, Psychological,
Social and Spiritual*

Treatment Planning

During the assessment process, members of Talbott Recovery staff (with patient approval) will contact family members, friends, healthcare providers and referents to collect key collateral data for integration into the patient's treatment plan. In our experience, patients (including those presenting with psychiatric co-morbidity) respond better to treatment, medications and recovery when every aspect of their lives has been addressed in the development of their treatment plan. Upon completion of a patient's assessment, the treatment team, led by the attending physician, develops an individual treatment plan for each patient and meets regularly to review each patient's progress and to update treatment goals.



The clinical Case Manager works closely with each patient, Family Counselor and the family to ensure the treatment plan is meeting the patient's changing needs. Soon after treatment begins, the patient's Continuing Care Coordinator will begin the process of identifying a patient's discharge needs and make plans for post-discharge.

Treatment Modalities

Group therapy is the cornerstone of change in all of our programs; we believe recovery cannot occur alone. All Programs utilize many of the following therapeutic techniques:

- Group therapy
- Medication management (of mood disorders)
- Individual therapy
- Procedural learning on how to use the 12-Steps
- Psychoeducation groups
- Profession issues groups
- Work related groups
- Relapse prevention
- Life skills
- Family therapy
- Family Program
- Spirituality groups
- Dialectical Behavioral Therapy (DBT)
- Sexual issues groups (men's & women's)
- Gender issues groups
- 12-Step recovery meetings on and off campus
- EMDR (Eye movement desensitization and reprocessing) for trauma issues
- Meditation and mindfulness training

*Family Programs
educate and support*

Family Program

The Family Services Department at Talbott Recovery provides patients and families support and education on the disease of addiction, cross addiction and the impact on the family. The Family Program is designed to assess the family's needs, educate about chemical dependence and offer ongoing family support during and/or after the patient's treatment. The family program is the first step many addicted families make towards healing.

Once a patient is admitted to Talbott Recovery, a family counselor is assigned to respond to any questions or concerns. That family therapist works with our families, by phone, when they attend the family program. The family program consists of approximately five family sessions and a family workshop during treatment. The family workshop is a four-day educational and supportive experience. The workshop provides education on the disease of addiction and cross addiction and offers an opportunity to address questions and concerns.

Mirror Image

After completing the partial hospitalization phase of treatment, patients are transitioned to Talbott Recovery Mirror Image phase. Extended Mirror Image may be recommended for patients when indicated.

Mirror Image is an addiction treatment innovation created and first implemented by Talbott Recovery founder, Dr. Douglas Talbott. Mornings, five days a week, Talbott Recovery Mirror Image patients go to other treatment facilities in the Atlanta area and work with newly admitted alcoholics and addicts at that facility. The purpose is to assist Talbott Recovery patients to overcome the myopia that often accompanies the disease of addiction - patients can see the affects of the disease of addiction in others but are unable to see those same affects in themselves. Patients consistently report that their experience in Mirror Image has a profound affect on their recoveries. Mirror Image patients return to Talbott Recovery for afternoon groups and appointments with physicians and clinicians.

*Build a long-term
Recovery System*

Continuing Care

Talbott Recovery is committed to helping our patients and their families build a long term, self-sustaining recovery. Talbott Recovery's continuing care process assists patients and families to develop a program of recovery and a support system that will provide a solid foundation to achieve that goal after they leave our facility.

At Talbott, we believe that continuing care actually begins prior to the patient arriving for treatment. Whoever refers a particular patient to Talbott Recovery becomes the starting point for communication (with consent) with our treatment team and continuing care coordinator. This begins a process of communication that our coordinators build on throughout the course of treatment.



Each patient is assigned a continuing care coordinator that will work with them throughout the treatment course to:

1. Serve as the referent liaison with our referral sources and the clinical treatment team
2. Gather collateral information and provide written and verbal updates to referents
3. Assist the patient with any work, licensure or legal issues
4. Participate in the multi-disciplinary treatment team to assess patient's progress
5. Identify unresolved treatment issues to be included in discharge planning
6. Plan Extended Therapeutic Leaves (ETL) for the patients prior to discharge to set up aftercare at home
7. Establish a clinical team to assist with patient's long term recovery post-discharge

*Working together
as a team to recover*

Transitional Living Program

We provide a healthy, supportive, and structured living environment for individuals who have completed a Talbott treatment program but need more accountability and guidance. Each resident is assisted with implementing the critical skills learned in addiction treatment into a successful, meaningful way of life in recovery. Upon completion of the primary phase of addiction treatment, any patient wanting more structure and time to work on his/her recovery can transfer to the Transitional Living Program. Residents continue to live in a recovery community, go to 12-Step meetings daily, and participate in a Peer Support Group and community group therapy for addiction once a week. A Talbott staff member lives in the community and is available to assist with any problems or questions residents may have. Each resident is asked to work, be a volunteer, or go to school for at least 20 hours each week.

The transitional living community is a place to practice using the tools of addiction recovery and to focus on applying the 12-Steps to solve every day problems while living with other recovering individuals. Honesty (behavioral and emotional) is the foundation of a durable recovery. When combined with openness to direction and experience of others, and the willingness to follow suggestions, a strong foundation for individual recovery and a stronger community is developed. Talbott Transitional Living program is another step in the recovery process to providing every opportunity for a healthy and happy recovery.

Patient Residential Communities

Talbott Recovery patients reside in modern apartments in a surrogate family setting. This setting heals the isolation, loneliness and behavioral problems that every addict or alcoholic develops over the course of their disease. Patients live in apartment residences composed of peers working together as a team to recover.

*Set-up an Admission
24-hours a day*

Admissions Process

1. Call to speak with an Intake Specialist

Although many of our patients are physician referred, admission to Talbott does not require a physician referral. Patients or family members may set up an admission by calling (800) 445-4232 or (770) 994-0185 twenty four hours a day.

2. Medical Records

Your Intake Specialist will gather all the required medical information and review your application with a Talbott Recovery physician. Once the patient has been cleared medically, admission can usually be arranged within 24 hours. If the patient is not medically appropriate for Talbott Recovery, your Intake Specialist can help you with referrals to other facilities.

3. Patients transferring from another facility

If a patient is transferring from another facility, medical records should be faxed to our Intake Office at (770) 997-8480. Based on information provided, a Talbott Recovery physician will review and approve the admission.

4. Approval of Patient Application & Finances

After the patient has medical clearance, your Intake Specialist will help you to make all the necessary financial arrangements and an admission date will be scheduled.



History of Talbott's Programs

For over 35 years Talbott Recovery has been dedicated to delivering the highest quality addiction treatment services available. Originally the Talbott Recovery program was primarily designed to treat impaired healthcare professionals (physicians, dentists, pharmacists, and nurses) earning Talbott Recovery a national reputation as: "the place where healers come to be healed." During those three decades, alcohol and drug rehab program services were expanded and offered to a full range of adults (18 years and older) and now includes a second specialty program designed to address the unique issues and recovery challenges faced by young adults (18 to 25 years). From the outset our recovery center was recognized as a leader in the development of treatment techniques for alcoholic and chemically dependent patients. In large part this was due to the innovative work of Talbott Recovery's co-founder, Dr. G. Douglas Talbott. During his tenure as Medical Director, Dr. Talbott developed pioneering treatment features like Talbott Recovery Mirror Image, Extended Therapeutic Leaves and our Alumni Return Visit Program. After numerous other drug and alcohol recovery centers adopted these techniques Talbott Recovery became known as a program that was: "often copied but never equaled."



"where healers come to be healed"

Insurance Coverage

Please call the Talbott Recovery Intake Department and speak with one of our specialists who will assist you in getting the best utilization of any available insurance benefits. TALBOTT Dunwoody and TALBOTT Columbus are in network with most major insurance companies.



TALBOTT RECOVERY

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Adult Program Information

Adult Program Description:

Talbot Recovery Campus' (TRC) Adult Program provides comprehensive treatment of addiction (alcoholism and other drug use disorders and other addictive disorders) and its attendant related medical, psychological, psychiatric, spiritual and work-related problems.

Like TRC's Professionals Program, the Adult Program houses patients in a residential, surrogate family setting. This setting heals the isolation, loneliness and behavioral problems that every addict or alcoholic develops over the course of their disease. Group therapy is the cornerstone of change in all of our programs; we believe recovery cannot occur alone.

Who we treat:

TRC accepts patients with a dual-diagnosis, such as addiction with a concomitant depression, anxiety, unresolved grief, personality problems, etc. All of our patients have a chemical abuse problem, but we address the whole patient in his/her disease. We screen the health status of all potential patients to make sure we are the proper facility for care. This usually involves a review of any medical history and records by a member of the medical staff at TRC, and an intake screening assessment with our intake department.

Insurance:

Please call the TRC Intake Department (800.445.4232) and speak with one of our specialists who will assist you to get the best utilization of any available insurance benefits.

Levels of Care:

We stage the intensity of treatment based upon the levels described by the American Society of Addiction Medicine [Patient Placement Criteria](#), Version II, Revised.

Detoxification & Stabilization

Inpatient stabilization is available for patients requiring a more complicated detoxification and/or behavioral containment to interrupt the downhill spiral of his/her addiction.

Partial Hospitalization Program (PHP with boarding)

Following admission or transfer from detox and stabilization, each patient undergoes a thorough evaluation if he/she has not obtained an evaluation previously. The evaluation assesses the patient's physical, psychiatric, psychological, social, spiritual, and family needs to determine the most appropriate level of care.

Intensive Outpatient Program (IOP with boarding)

After completing the partial hospitalization phase of treatment, patients are transitioned to TRC's Mirror Image phase (see Treatment Elements). Extended Mirror Image may be recommended for patients when indicated.

Length of Stay at TRC

A patient's length of stay will be determined by the patient's treatment requirements and the patient's progress through treatment. The average length of stay in the Professionals Program is 90 days.

Continuity of Care:

Talbott Recovery Campus (TRC) offers an array of services and levels of care. Each level of care addresses the needs of our patients during different times in their treatment. We stage the intensity of treatment based upon the levels described by the American Society of Addiction Medicine [Patient Placement Criteria](#), Version II, Revised.

Patient Assessments

Each patient undergoes a thorough evaluation if they have not obtained an evaluation previously. If clinically indicated, prior to admission a 96 Hour Assessment may be recommended to help facilitate decision making by prospective patients, family members and referents. The evaluation assesses the patient's physical, psychiatric, psychological, social, spiritual, and family needs to determine the most appropriate level of care. The multi-disciplinary assessment team includes:

- Attending Physician
- Psychiatrist
- Clinical Psychologist
- Internal Medicine Specialist
- Addiction Medicine Specialist
- Assessment Coordinator

The team may also include a pain specialist, a neurologist, a behavioral medicine specialist or a sexual boundaries specialist as needed. A fifth day may be required for any additional evaluations that may be required.

Each Assessment includes:

- Internal medicine evaluation / physical exam

- Psychiatric evaluation
- Addiction medicine evaluations
- Bio-psychosocial self-assessment
- Laboratory work and drug screens
- Comprehensive psychological testing
- Extensive neuropsychological testing

Treatment Planning

During the assessment process, members of TRC's staff (with patient approval) will contact family members, friends, healthcare providers and referents to collect key collateral data for integration into the patient's treatment plan. In our experience, patients (including those presenting with psychiatric co-morbidity) respond better to treatment, medications and recovery when every aspect of their lives has been addressed in the development of their treatment plan.

Upon completion of a patient's assessment, the treatment team, led by the attending physician, develops an individual treatment plan for each patient and meets regularly to review each patient's progress and to update treatment goals. The clinical case manager works closely with each patient, Family Counselor and the family to ensure the treatment plan is meeting the patient's changing needs. Soon after treatment begins, the patient's continuing care coordinator will begin the process of identifying a patient's discharge needs.

Treatment Modalities

Group therapy is the cornerstone of change in all of our programs; we believe recovery cannot occur alone. The Adult Program utilizes many of the following therapeutic techniques:

- Group therapy
- Medication management of mood disorders
- Individual therapy
- Procedural learning on how to use the 12-Steps
- Psychoeducation group
- Impaired professionals issues group
- Profession-specific groups for medical doctors, dentists), nurses, pharmacists, attorneys and pilots
- Life skills
- Spirituality group
- Family therapy
- Family Program
- 12-Step recovery meetings on campus
- Relapse prevention
- Gender issues group
- Sexual Issues (Male / Female)
- Grief Group

- EMDR (Eye movement desensitization and reprocessing) for trauma issues
- Meditation and mindfulness training

Family Program

The Family Services Department at TRC provides patients and families support and education on the disease of addiction, cross addiction and the impact on the family. The Family Program is designed to assess the family's needs, educate about chemical dependence and offers ongoing family support during and/or after the patient's treatment. The family program is the first step many addicted families make towards healing. Once a patient is admitted to TRC, a family counselor is assigned to respond to any questions or concerns. That family therapist works both at a distance and close up with our families when they attend the family program.

The family program consists of approximately five family sessions and a family workshop during treatment. The family workshop is a four-day educational and supportive experience. The workshop provides education on the disease of addiction and cross addiction and offers an opportunity to address questions and concerns.

Mirror Image

Mirror Image is an addiction treatment innovation created and first implemented by TRC founder, Dr. Douglas Talbott. Mornings, three days a week TRC Mirror Image patients go to other treatment facilities in the Atlanta area and work with newly admitted alcoholics and addicts at that facility. The purpose is to assist TRC patients to overcome the myopia that often accompanies the disease of addiction - patients can see the affects of the disease of addiction in others but are unable to see those same affects in themselves. Patients consistently report that their experience in Mirror Image has a profound affect on their recoveries. Mirror Image patients return to TRC for afternoon groups and appointments with physicians and clinicians.

Continuing Care

Talbott Recovery Campus is committed to helping our patients and their families build a long term, self-sustaining recovery. TRC's continuing care process assists patients and families develop a program of recovery and a support system that will provide a solid foundation to achieve that goal after they leave our facility.

At Talbott, we believe that continuing care actually begins prior to the patient arriving for treatment. Whoever refers a particular patient to TRC becomes the starting point for communication with our treatment team and continuing care coordinator. This begins a process of communication that our coordinators build on throughout the course of treatment. Each patient is assigned a continuing care coordinator that will work with them throughout the treatment course to:

1. Serve as the referent liaison with our referral sources and the clinical treatment team
2. Gather collateral information and provide written and verbal updates to referents
3. Assist the patient with any work, licensure or legal issues
4. Participate in the multi-disciplinary treatment team to assess patient's progress

5. Identify unresolved treatment issues to be included in discharge planning
6. Plan Extended Therapeutic Leaves (ETL) for the patients prior to discharge
7. Establish a clinical team to assist with patient's long term recovery post-discharge

Return Visit

Almost fifteen years ago, the leadership at Talbott Recovery Campus, working together with former patients, developed the return visit program. Alumni spoke of the significant number of important new friendships they had made with other patients while at TRC. These alumni spoke of the confidence and trust they had developed with TRC staff. And mostly, they spoke of how they wanted to "reconnect" with friends on a regular basis. Responding to this feedback, TRC leadership developed our Return Visit program. Since then, Return Visit has become an important and well-attended component of the programs offered by Talbott Recovery Campus.

Return Visit is:

- A time to come back to TRC to help "recharge recovery batteries"
- A time to meet and "catch up with" old roommates and "domemates"
- A time to "reconnect" with TRC staff who have been important to the patient and to his/her recovery
- A time to remember and recommit to the foundation for recovery they began to build for themselves while in treatment
- A time to offer hope and encouragement and support to current TRC patients

Patients are encouraged to plan their recovery around revisits to the TRC campus. We have learned that the patients who take the time to return to us have a markedly increased recovery rate. Addiction is a disease that we forget we have. The recovery visits remind us to tend to ourselves and our recovery program.

What To Bring To Treatment

- Pharmacy plan information
- Alarm clock
- Toiletries w/no alcohol (including colognes)
- Calling card/pre-paid for long distance
- Photos of friends & family**
- Favorite pillow**
- Personal CD player/radio w/headphones (not for use on campus) **
- Workout clothes**
- Musical instruments**
- PDA's (not smart phones)**
- Sports equipment (golf clubs, tennis rackets, etc)**
- Casual clothing
- Bathing suit (women - one piece only)**
- Art supplies**
- Writing supplies (journals, stationary, stamps)**
- Reading materials**
- Patients are encouraged to have a car (after receiving staff approval)

****Optional**

What Not To Bring To Treatment

Cell phone
Weapons of any kind
Non-prescribed medications (including samples)
Personal computers or equipment
Musical instrument amplifiers
Pets
Pornographic books & magazines, including Maxim
DVD/VCR players
Video games
Alcohol/drugs
Excessive jewelry/cash/credit cards
Inappropriate clothing (tank/sleeveless tops, navel-revealing, references to drugs/alcohol, skin-tight, low-riding)

Provided By TRC In Each Apartment

Towels
Bed linens
Washer/Dryer
Telephone (phone card necessary for toll calls)
Coffee maker
Microwave
Internet access (available at treatment building only – not at residences)

Frequently Asked Questions:

1. What age patients would be assigned to the Adult Program?
A: Generally men and women (26 years & older) struggling with alcohol or chemical addiction/abuse and/or a dual diagnosis. However, final decisions on program assignment will be based on individual patient's age and treatment requirements.

2. What will be the Average Length of Stay (LOS)?
A: 14 weeks is the average LOS but each patient's actual length of stay will be determined by that patient's treatment requirements and progress through treatment. Inpatient detox and assessment and/or stabilization are not included in that 14 weeks.

3. What is the cost for the Adult Program?
A: The cost of treatment will vary with each patient's length of stay (LOS) and individual treatment requirements. Please call the TRC Intake Department (800.445.4232) and speak with one of specialists who will help you to determine the costs for your patient.

4. Do you accept insurance?
A: Please call the TRC Intake Department (800.445.4232) and speak with one of specialists who will assist you to get the best utilization of any available insurance benefits.
5. What are the levels of treatment offered?
A: Detoxification & Stabilization, Partial Hospitalization (PHP – Primary Treatment with residential component), Mirror Image, Intensive Outpatient (IOP with residential component), Outpatient and structured living (non-TRC / outside facility) as indicated
6. Do you offer assessments?
A: Yes. Following admission, each patient will undergo a thorough evaluation and will be given a treatment plan. The evaluation will assess the patient’s physical, psychological, social, spiritual, and family needs to determine the most appropriate level of care. Some Professionals Help Programs or state licensing authorities may require a 96 Hour Assessment before admission. 96 Hour Assessments are available to these prospective patients. When clinically indicated, a 96 Hour assessment may be recommended to help facilitate decision making by other prospective patients, family members and referents.
7. What types of patients are appropriate for treatment at TRC?
A: TRC accepts patients with a multiple disease states, such as addiction with a concomitant depression, unresolved grief, personality problems, etc. All of our patients have a chemical abuse problem, but we address the whole patient in their disease. We screen the health status of all potential patients to make sure we are the proper facility for care. This usually involves a review of any medical history and records by a member of the medical staff at TRC, and an intake screening assessment with our Intake Department.
8. What types of patients are not appropriate for TRC?
A: Patients with a primary psychiatric diagnosis, who are suicidal, with medical conditions that require inpatient care or patients with behavioral problems such as violence or flight risk.
9. What makes TRC's Adult Program different from programs at other treatment centers?
A:
- Separate program designed to specifically meet the treatment requirements and discharge issues and challenges of professionals
 - Low patient to staff ratio
 - Six full time physicians on staff physicians (all addiction medication specialists including 3 psychiatrists)
 - Family Program & Workshop
 - Extended Therapeutic Leaves
 - Post discharge monitoring and support groups
 - Return Visit Program

10. Why would I be successful in your program when I haven't been successful at getting clean and sober at other programs?

A:

- *Paul H. Earley, M.D., FASAM – TRC Medical Director*
“Short term treatment of addiction is like throwing seeds into the ground and hoping they take root. Intermediate care, such as that provided by the Talbott Recovery Campus treats the personality, because the personality is the soil in which recovery is planted. Our job is to tend that soil; to make a patient’s personality fertile so that recovery will grow deep roots and recovery blossoms.”
- See answer to Question #9

11. Where do patients live?

A: TRC houses patients in a residential, surrogate family setting. This setting heals the isolation, loneliness and behavioral problems that every addict or alcoholic develops over the course of their disease. Group therapy is the cornerstone of change in all of our programs, including the Adult Program; we believe recovery cannot occur alone.

12. How will I get from the residences to campus every day?

A: Until patients have earned staff approval to have a car on campus and for patients who do not have cars, TRC provides for patients’ transportation needs.

13. Who will be involved with my treatment?

A: Each patient is assigned an attending physician upon admission to TRC. The physicians at TRC are Psychiatrists, Internal Medicine specialists or Addictionologists. All are certified by the American Society of Addiction Medicine (ASAM). The other members of a patient’s treatment team are:

Psychiatrist / Internist	Case Manager
Family Counselor	Continuing Care Coordinator
Spiritual Counselor	Clinical Associate

14. How often will I see a physician? Therapist (Case Manager)? Family Counselor?

A:

- Physician - 1 time / week (minimum)
- Case Manager – Daily
- Family Counselor – 1 time / week

15. What does the day's activities look like? – Click here for Daily Schedule

16. What education, groups and sessions are offered to help me understand the disease of addiction/dual-diagnosis?

A: Patients and their families participate in psychoeducational and psychotherapeutic groups designed to help them explore addiction and dual disorders as well as the impact this disease can have on the family.

Treatment Modalities include:

- Group therapy
- Medication management (of mood disorders?)
- Individual therapy
- Procedural learning on how to use the 12-Steps
- Psychoeducation group
- Impaired professionals issues group
- Profession-specific groups for medical doctors, dentists, nurses, pharmacists, attorneys and pilots
- Life skills
- Spirituality group
- Family therapy
- Family Program
- 12-Step recovery meetings on campus
- Relapse prevention
- Gender issues group
- Sexual Issues (Male / Female)
- Grief Group
- EMDR (Eye movement desensitization and reprocessing) for trauma issues
- Meditation and mindfulness training

17. What will I do in the evenings?

A: Evenings are times when patients:

- Attend 12 Step Meetings (on and off campus)
- Participate in Community Meetings (at the residences)
- Attend alumni groups (on campus)
- Work on program assignments
- Continue to work on socialization skills
- Read, relax, watch television or listen to music

18. What will my weekends look like?

A: On weekends, patients will attend a group at TRC. They will also be required to attend a 12 step meeting. TRC staff will provide recreational activities and patients will have time to take care of personal needs: grocery, pharmacy, free time, treatment assignments, etc.

19. Who will be providing my meals?

A: TRC's founder, Dr. Douglas Talbott's treatment philosophy was that patients must learn to be responsible for their own lives and for their sobriety. As soon as patients are stable, they are moved to the patient residences where they cook their

own meals (along with their roommates) in each apartment. All apartments are equipped with required cooking equipment, dishwashers and washer / dryers.

20. Will I be interacting with the opposite sex?

A: Yes, with staff supervision only

21. May I bring a car?

A: Once patients have completed detox, stabilization and have earned staff approval, they are encouraged to have a car on campus if possible. Patients are only allowed to utilize their automobile in the company of two other staff qualified patients.

22. May I bring a Cellphone?

A: No. Patients in the Impaired Professionals Program are not allowed to have a Cellphone during treatment.

23. Will I be able to communicate with my friends and family? How often?

A: Patients can write letters or email friends based on the recommendations of their treatment team. One goal of treatment is keep the patient focused on their treatment and new recovery. Too much outside contact can defocus the patient.

24. How will my family be involved with my treatment?

A: Family is a very important part of the patient's recovery. During treatment, each patient / family will be assigned a family counselor who will do a detailed assessment with the patient and also with the family members to determine each family's unique needs. Then, throughout treatment, the family counselor will have weekly family counseling sessions, which can be done on the phone or in person, if the family lives locally. We also have a family support group each Tuesday evening from 6:15-7:30 for any family members who would like to attend. The patient's physician will be in contact with the family as needed to discuss course of treatment, progress and aftercare recommendations.

Sample Family Program Schedule

Time	Monday	Tuesday	Wednesday	Thursday
8:30 a.m. 9:00 a.m.	Registration Welcome- Orientation	8:45 a.m. Lecture	8:45 a.m. Lecture	8:45 a.m. Lecture
9:45 a.m.	Lecture			
10.00 a.m.		Lecture	Lecture	Lecture
11:30 a.m.	Group	Group	Group	Group
12:30 p.m.	Lunch	Lunch	Lunch	Lunch

1:30 p.m.	Lecture	Lecture	Lecture	Lecture
3:00 p.m.	Group	Group	Group	Group
4:00 p.m.		4:30-5:30 p.m. Reception	Free time with patient to include 12-Step meeting	4:00 p.m. Community Meeting/AA
5:00 p.m.	Al-Anon Meeting	6:15 p.m. Group (Spouses/SO)		
6:	00 p.m. Free time with patient	7:45 p.m. Free time with patient	6:	30 p.m. Free time with patient
10:30 p.m.	Curfew	Curfew Cu	rfew	Curfew

25. If I am on medications, how will the medications be dispensed?

A: Medications are distributed at TRC for the patient's first week of treatment. After the first week, the patient is responsible for picking up and paying for medications at the pharmacy themselves. Patients are given medications in weekly or monthly doses as determined to be safe by the physician.

26. What happens when I am discharged from treatment?

A: The Talbott staff will help each patient develop an appropriate aftercare plan. This may include outpatient therapy, family counseling and structured living (non-TRC / outside facility). Random drug screens may be recommended. All elements are determined by the clinical team in the patient's best interest for recovery.

27. What aftercare or continuing care services are provided?

A: Physician monitoring, Tuesday night peer support group, individual therapy.

28. Will I have to live in a halfway house once discharged from treatment?

A: The treatment team will work with the patients and their families to determine what will be the most effective plan for each patient.

29. Will I be allowed to go on Extended Therapeutic Leaves (ETL's)?

A: Yes, to set up aftercare, if returning to a home not in the local Atlanta area.

30. Will I be able to participate in Return Visits as well?

A: Yes

Online Admissions Form

Please complete as many questions as possible and fax the completed form to: 770.997.8480.

Online Admissions Form Information about person submitting this application

First Name: _____ Middle Name: _____ Last Name: _____

Relationship to patient: _____

Street Address: _____

Street Address: _____

City: _____ Zip Code: _____ Country: _____

Phone Number(s) (please provide a number that is appropriate to call when an Intake Counselor contacts you) ...

Home Phone: () _____ Best time to call: _____

Work Phone: () _____ Best time to call: _____

Mobile Phone: () _____ Best time to call: _____

Is it okay to contact you? No Yes Email Address: _____

How did you learn about TRC? _____

Patient Information

First Name: _____ Middle Name: _____ Last Name: _____

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____ Gender: Male Female

Street Address: _____

Street Address: _____

City: _____ Zip Code: _____ Country: _____

Phone Number: () _____

Marital Status...

- Never been married Married Divorced Separated Widowed

How will you be paying for your treatment?

- Cash Cashier's Check Money Order Credit Card Insurance

Insurance Information

ID#: _____ Group#: _____

Insurance Company Name: _____ Insurance Company Phone Number: () _____

Name of Employer: _____ Name of Policyholder: _____

Relationship to Patient: _____

Phone Number: () _____ Policy Holder's Date of Birth: ____/____/____

Do you want us to verify your coverage prior to contacting you? No Yes

Online Admissions Form

Questionnaire

Name of drug: _____

How long have you used: Months: 3 6 9 Years: 1 2 3 4 5 6 7 8 9 10 More than 10 years, Amount: _____

Name of drug: _____

How long have you used: Months: 3 6 9 Years: 1 2 3 4 5 6 7 8 9 10 More than 10 years, Amount: _____

Name of drug: _____

How long have you used: Months: 3 6 9 Years: 1 2 3 4 5 6 7 8 9 10 More than 10 years, Amount: _____

Have you ever been to treatment before? No Yes

(if so, complete the section(s) below - please be sure to include inpatient and outpatient programs attended)

Name of program:

Type: Select Inpatient Outpatient Other Dates attended: From: ____/____/____ To: ____/____/____

Did you complete treatment? Not Yes Was this a 12-step program? Not Yes

Name of program:

Type: Select Inpatient Outpatient Other Dates attended: From: ____/____/____ To: ____/____/____

Did you complete treatment? Not Yes Was this a 12-step program? Not Yes

Name of program:

Type: Select Inpatient Outpatient Other Dates attended: From: ____/____/____ To: ____/____/____

Did you complete treatment? Not Yes Was this a 12-step program? Not Yes

Have you ever attempted to stop drinking or using? No Yes

If so, which of the following symptoms did you experience? (Please check all that apply)

Seizures Shakes Tremors Swelling Headaches Nausea Vomiting Other...

If "Other", please describe: _____

Are you currently or have you ever seen a psychologist, psychiatrist, therapist or counselor? No Yes

If so, when? _____

If so, why? _____

Were you given a diagnosis? No Yes

If so, what was it? _____

Were you placed on any medication? No Yes

If so, what type and the amount of dosages? _____

Online Admissions Form

Questionnaire (continued)

Have you thought, planned or attempted suicide? No Yes

If so, when? _____

Were you under the influence at the time? No Yes

Have you been ill or hospitalized in the past 30 days? No Yes

If so, why? _____

Do you have any medical problems or physical pain? No Yes

If yes, please describe... _____

Are you currently taking any prescribed medications? No Yes

If yes, what type of medication(s)? _____

Who prescribed the medication to you? (Doctor's name) _____

Are you able to walk, feed, dress, bathe and care for yourself? No Yes

Please check yes or no for the following...

No Yes - Do you have any legal problems from your substance use?

No Yes - Have you driven under the influence?

No Yes - Have you lost a job due to your use?

No Yes - Have you missed work/called in sick due to your use?

No Yes - Are you isolating yourself from family and friends?

No Yes - Is there is a history of addiction in your family?

No Yes - Do you have medical problems due to your use?

For additional information please call our Admissions Department at:

Toll Free: (800) 445-4232

Or at: 770-994-0185