1. In preparation for the ISPT the prescriber should have the following information available to him/her during the meeting:
   a. The child’s name
   b. If the ISPT is for an initial or continued stay packet
   c. The most recent BP eval (as well as any past evaluation if necessary)
   d. Any questions or information the prescriber needs to access from the team members (such as scores on self-reports, information about medication side effects, child/family’s compliance with treatment, etc.)

2. The purpose of having the prescriber at the ISPT is to discuss the following findings from the BP eval and have input into the following topics discussed at the meeting:
   a. Child’s symptoms (including nature, frequency, intensity, and history)
   b. Child’s diagnosis and rule-outs
   c. Treatment recommendations/updates
   d. The suggested treatment interventions, including self-report scales and tracking forms that will be used to review the child’s progress in treatment
   e. The plan for decreasing/discontinuing services

3. In addition, the prescriber should give his/her input in the event that the ISPT is not in agreement with the prescribed services and finalize the prescription via the prescriber collaboration.

4. ISPT participation by the prescriber is billable