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BEHAVIORAL HEALTH OUTPATIENT CLINIC
2121 Main Street
Anywhere, USA

Date of Exam: 6/9/2016
Time of Exam: 3:38:08 PM

Patient Name: Little, Aimee
Patient Number: 1000010659748

Psychotherapy Progress Note

Mrs. Little seems to have had an inadequate response to treatment as yet. Symptoms of depression continue to be described. Her symptoms, as noted, are unchanged and they are just as frequent or intense as previously described. Mrs. Little describes feeling sad. Mrs. Little denies suicidal ideas or intentions. Mrs. Little's anxiety symptoms continue. Mrs. Little reports the symptoms of this disorder continue unchanged. The subjective feeling of apprehension is occurring. Hypervigilance is occurring more frequently.

BEHAVIOR:

Her self care is reduced and less attention is being paid to these tasks. She reports the feeling that the performance of domestic tasks has to be forced and are performed with difficulty. She is socially isolated. Sleep problems are reported. Difficulty staying asleep is reported.

CONTENT OF THERAPY:

The patient today spoke mainly about issues involving coping with depression. Problems in the family were also discussed by the patient. Mrs. Little shared the following pertinent details during this session: "I miss my husband terribly and wonder if I will ever get over this." Feelings of loss were also expressed. Feelings of grief were also expressed.

THERAPEUTIC INTERVENTION:

This session the therapeutic focus was on facilitating communication of feelings. Patient urged to ask for help and support from staff member or therapist when feeling depressed. Aimee will use session to deal with grief over loss as demonstrated by the expression of painful feelings along with associated affect. She was encouraged to ventilate. Ways to reduce stress were also discussed with the patient.

Diagnoses:

Adjustment disorder with depressed mood, F43.21 (ICD-10) (Active)
Generalized anxiety disorder, F41.1 (ICD-10) (Active)
Histrionic personality disorder, F60.4 (ICD-10) (Active)

Instructions / Recommendations / Plan:

The risks and benefits of outpatient therapy were explained to Mrs. Little. She was encouraged to join a grief support group held at her church.

Return 1 week, or earlier if needed.

Notes & Risk Factors:

Acute Grief: Death of husband 4/1/15

90834 Psychotherapy 45 min.

Time spent face to face with patient and/or family and coordination of care: 45 minutes

Session start: 9:00 AM

Session end: 9:45 AM

Anita Iten, LCSW

Electronically Signed

By: Anita Iten, LCSW

On: 6/9/2016 3:46:59 PM