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**Smith, Katie**  
ID: 1000010681770 DOB: 1/1/1988

9/1/2020  
12:58:45 PM

### Care Plans

**Problem / Need: ANXIETY**

**PROBLEM: Anxiety**

Ms. Smith's anxiety has been identified as an active problem that requires treatment. It is primarily evidenced by:

*Post Traumatic Stress Disorder: Details as follows:*

- \*Feelings of Detachment or Estrangement from Others
- \*Sense of Foreshortened Future
- \*Sleep Difficulty

**LONG TERM GOAL:**

Ms. Smith will reduce the negative impact that traumatic events have had on many aspects of life and return to the pre-trauma level of functioning.

Target Date: 9/15/2020

**SHORT TERM GOAL(S) & INTERVENTIONS:**

Short Term Goal / Objective:

Ms. Smith will exhibit decreased anxiety by 2 points on a self-report 0-10 scale, reported weekly.

Frequency: weekly per session Duration: one month

Target Date: 9/15/2020

Intervention:

Therapist/Counselor will teach Ms. Smith four coping and distraction strategies to use when anxious, to help decrease PTSD symptoms. Utilize a rating scale to assist in monitoring and decreasing anxiety by 2 points on a 0-10 scale. Progress will be monitored and documented.

Frequency: once per session

Short Term Goal / Objective

Ms. Smith will identify and clarify nature of fears and symptoms associated with traumatic experience.

Frequency: weekly per session Duration: for one month

Target Date: 9/15/2022

**Smith, Katie**

9/1/2020

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ID: 1000010681770

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**Care Plans**

**Intervention:**

Therapist/Counselor will provide therapy, encouragement and support to help Ms. Smith to identify and clarify nature of fears and symptoms associated with anxiety. Progress will be monitored and documented.

Frequency: once per session

**Short Term Goal / Objective:**

Ms. Smith will learn and practice progressive relaxation methods and deep breathing techniques to help alleviate anxiety.

Frequency: weekly per session Duration: for one month

**Intervention:**

Therapist/Counselor will provide progressive relaxation methods and deep breathing techniques training to Ms. Smith to help control the symptoms of PTSD. Progress will be monitored and documented.

Frequency: once per session

**STATUS:**

9/1/2020: The undersigned clinician met with the patient (and family, as appropriate) on the date above in a face to face meeting to work with him/her in developing this Treatment Plan.