# **Psychotherapy Progress Note**

Use this note to document individual, family or couples psychotherapy sessions and person's response to the intervention during a specific contact.

Data Field	
Person's Name	Record the first name, tast name, and middle initial of the person. Order of name is at agency discretion.
Record Number	Record your agency's established identification number for the person.
Person's DOB	Record the person's date of birth.
Organization Name:	Record the organization for whom you are delivering the service.
Modality	Check appropriate box to indicate the type of session: individual, family or couple.
List Name(s) of Person(s) Present	Check appropriate box to indicate whether the person is Present, is a No Show/Cancelled or the Provider Cancelled. For cancellations, complete Explanation as needed. Check appropriate box to indicate if others are present, list name(s) and reliableously(s) to person.
Person's Report of Progress Towards Goals/Objectives Since Last Session	Document person's self-report of progress towards goals since tast session including other sources of information, such as family, case manager, etc.
New Issue(s) Presented Today	There are four options available for staff using this section of the progress note.  1. If person does not report/present any new issues, mark 'None Reported' and proteed to planned intervention/goals.  2. If person reports a new issue that was resolved during the session check the 'New Issue resolved, no CA Update required' box. Briefly document the new issue, identity the interventions used in the Therapeutic interventions Section and indicate the resolution in the Response Section of the progress note.  Example: Person described being involved in a minor car accident today. Person was not hurt but expressed concern regarding expense of car report. Person helt more relieved after identifying ways to cover expense over the next two weeks.  3. If person presents an issue that has been previously assessed and for which Goals/Objectives and services have been ordered, then the information may be briefly documented as an indicator of the progress or tack of progress achieved.  4. If person presents any new issue(s) that represent a therapeutic need that is not already being addressed in the NP, check box indicating a 'CA. Update Required' and record notation that new issue has been recorded on a Comprehensive Assessment Update of the same Date and write detailed namative on the appropriate GA Update as instructed in this manual. Also, the newly assessment Update of the same Date and write detailed manative on the appropriate GA Update is information may require a new goal, objective, therapeutic intervention or service that will require further use of the UAP Review/Revision form.  Example: Person reported for the first time that she was a victim of abuse/neglect at the age of twelve as recorded on the Comprehensive Assessment Update of that date.

# **Sample Progress Notes For Individual Therapy**

**Geri Miller** 

### **Sample Progress Notes For Individual Therapy:**

The Adult Psychotherapy Progress Notes Planner Arthur E. Jongsma, Jr., Katy Pastoor, David J. Berghuis, 2021-05-11 The Adult Psychotherapy PROGRESS NOTES PLANNER PracticePlanners THE BESTSELLING TREATMENT PLANNING SYSTEM FOR MENTAL HEALTH PROFESSIONALS Fully revised and updated throughout The Adult Psychotherapy Progress Notes Planner Sixth Edition enables practitioners to quickly and easily create progress notes that completely integrate with a client's treatment plan Each of the more than 1 000 prewritten session and patient presentation descriptions directly link to the corresponding behavioral problem contained in The Complete Adult Psychotherapy Treatment Planner Sixth Edition Organized around 44 behaviorally based problems aligned with DSM V diagnostic categories the Progress Notes Planner covers an extensive range of treatment approaches for anxiety bipolar disorders attention deficit hyperactivity disorder ADHD dependency trauma cognitive deficiency and more Part of the market leading Wiley PracticePlanners series The Adult Psychotherapy Progress Notes Planner will save you hours of time by allowing you to rapidly adapt your notes to each individual patient's behavioral definitions symptom presentations or therapeutic interventions An essential resource for psychologists therapists counselors social workers psychiatrists and other mental health professionals working with adult clients The Adult Psychotherapy Progress Notes Planner Provides more than 8 000 prewritten easy to modify progress notes summarizing patient presentation and the interventions implemented within the session Features sample progress notes conforming to the requirements of most third party health care payors and accrediting agencies including CARF The Joint Commission TJC COA and the NCQA Include a brand new chapter that coordinates with the Treatment Planner's chapter on loneliness Additional resources in the PracticePlanners series Treatment Planners cover all the necessary elements for developing formal treatment plans including detailed problem definitions long term goals short term objectives therapeutic interventions and DSMTM diagnoses Homework Planners feature behaviorally based ready to use assignments to speed treatment and keep clients engaged between sessions For more information on our PracticePlanners including our full line of Treatment Planners visit us on the Web at www wiley com practiceplanners The Addiction Progress Notes Planner David J. Berghuis, Katy Pastoor, Arthur E. Jongsma, Jr., 2022-05-03 An invaluable practice resource for practitioners engaged in addictions treatment In The Addiction Progress Notes Planner Sixth Edition a team of distinguished mental health professionals delivers complete pre written session and patient presentation descriptions for every behavioral problem in the Addictions Treatment Planner Sixth Edition Each note can be simply and quickly adapted to fit a real world client need or treatment situation while remaining completely unified with the client's treatment plan This new edition offers new and revised evidence based objectives and interventions organized around 46 behavior based presentations including alcoholism nicotine dependence substance abuse problem gambling eating disorders and sexual addictions The resource also offers A wide array of treatment approaches that correspond to the behavioral problems and DSM V diagnostic categories included in

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The Psychotherapy Documentation Primer Donald E. Wiger, 2012-06-25 Everything you need to know to record client intake treatment and progress incorporating the latest managed care accrediting agency and government regulations Paperwork and record keeping are day to day realities in your mental health practice Records must be kept for managed care reimbursement for accreditation agencies for protection in the event of lawsuits to meet federal HIPAA regulations and to help streamline patient care in larger group practices inpatient facilities and hospitals. The standard professionals and students have turned to for quick and easy yet comprehensive guidance to writing a wide range of mental health documents the Third Edition of The Psychotherapy Documentation Primer continues to reflect HIPAA and accreditation agency requirements as well as offer an abundance of examples The new edition features Revised examples of a wider range of psychological concerns New chapters on documentation ethics and the art and science of psychological assessment and psychotherapy Study questions and answers at the end of each chapter Greatly expanded The Psychotherapy Documentation Primer Third Edition continues to be the benchmark record keeping reference for working professionals reflecting the latest in documentation and reporting requirements Therapeutic Modalities Kenneth L. Knight, David O. Draper, 2008 This user friendly text written in a clear and friendly manner by leading experts in the field is intended primarily for undergraduate athletic training students It encourages students to understand both the how and the why of therapeutic modality use so readers become thinking decision making professionals It provides the knowledge needed to evaluate and select the most appropriate modality All major modalities used to treat orthopedic injury and pain are covered from electrotherapy to therapeutic heat and cold to therapeutic massage <u>Textbook of Basic Nursing Caroline Bunker Rosdahl, Mary T.</u> Kowalski, 2008 Now in its Ninth Edition this comprehensive all in one textbook covers the basic LPN LVN curriculum and all content areas of the NCLEX PN Coverage includes anatomy and physiology nursing process growth and development nursing skills and pharmacology as well as medical surgical maternal neonatal pediatric and psychiatric mental health nursing The book is written in a student friendly style and has an attractive full color design with numerous illustrations tables and boxes Bound in multimedia CD ROMs include audio pronunciations clinical simulations videos animations and a simulated NCLEX PN exam This edition's comprehensive ancillary package includes curriculum materials PowerPoint slides lesson plans and a test generator of NCLEX PN style questions Language and Narratives in Counseling and Psychotherapy Scott T. Meier, 2012-03-05 Print CourseSmart Tardive Dyskinesia American Psychiatric Association. Task Force on Tardive Dyskinesia, 1992 Since the APA s last report on tardive dyskinesia in 1979 considerable research has been conducted on the

prevalence incidence and risk factors associated with the development of late occurring neuroleptic side effects This book summarizes the progress made over the last decade in understanding the differential diagnosis and epidemiology of tardive dyskinesia as well as risk factors course and treatment The reader will benefit from the book s coverage of indications for neuroleptic use alternative maintenance strategies factors to consider in making a differential diagnosis frequently encountered problems in dealing with special populations such as children and mentally retarded people clinical legal issues related to tardive dyskinesia clearly specified recommendations for prevention and management Documentation Mia Erickson, Ralph Utzman, Rebecca McKnight, 2024-06-01 Newly updated and revised Physical Therapy Documentation From Examination to Outcome Third Edition provides physical therapy students educators and clinicians with essential information on documentation for contemporary physical therapy practice Complete and accurate documentation is one of the most essential skills for physical therapists In this text authors Mia L Erickson Rebecca McKnight and Ralph Utzman teach the knowledge and skills necessary for correct documentation of physical therapy services provide guidance for readers in their ethical responsibility to quality record keeping and deliver the mechanics of note writing in a friendly approachable tone Featuring the most up to date information on proper documentation and using the International Classification of Functioning Disabilities and Health ICF model as a foundation for terminology the Third Edition includes expanded examples across a variety of practice settings as well as new chapters on Health informatics Electronic medical records Rules governing paper and electronic records Billing coding and outcomes measures Included with the text are online supplemental materials for faculty use in the classroom An invaluable reference in keeping with basic documentation structure Physical Therapy Documentation From Examination to Outcome Third Edition is a necessity for both new and seasoned physical therapy practitioners **Record Keeping in Psychotherapy and Counseling Ellen T.** Luepker, 2012-04-27 Record Keeping in Psychotherapy and Counseling provides an essential framework for understanding record keeping within legal ethical supervisory and clinical contexts Compelling case examples identify dilemmas and strategies in protecting confidentiality More than a simple reference book this text introduces the concept of using records as therapeutic tools to strengthen the therapeutic relationship and facilitate clinical supervision Appendices and an accompanying CD offer sample forms A reader friendly style makes this new edition appropriate for undergraduate and graduate students New material on electronic records the impact of electronic communication and practitioners experiences with implementing the Health Insurance Portability and Accountability Act bring this book up to date Everyone from students to seasoned practitioners will continue to rely on it for protecting themselves their patients and their trainees The New PMHNP's Survival Guide Isla Clara Lewis, Navigate Your Early PMHNP Career with Confidence Your Practical Guide to Documentation Billing and Beyond Stepping into your role as a Psychiatric Mental Health Nurse Practitioner PMHNP is a major achievement built on rigorous clinical training But the real world demands of practice often extend far beyond the

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Writing Patient/Client Notes Ginge Kettenbach, Sarah Lynn Schlomer, Jill Fitzgerald, 2016-05-11 Develop all of the skills you need to write clear concise and defensible patient client care notes using a variety of tools including SOAP notes. This is the ideal resource for any health care professional needing to learn or improve their skills with simple straight forward explanations of the hows and whys of documentation It also keeps pace with the changes in Physical Therapy practice today emphasizing the Patient Client Management and WHO's ICF model

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**Placement Handbook** Brian N. Baird,2015-07-14 The Internship Practicum and Field Placement Handbook Seventh Edition is a practical guide to the real world knowledge and skills that students need when they begin working in the field of mental health This text guides interns through every phase of the internship process from finding placements to concluding relationships with clients and supervisors Along the way students learn about ethics clinical writing and record keeping working with peers and supervisors understanding diversity and self care and safety Following an evidence and competency based approach the latest research findings are reviewed from the fields of psychology social work and counseling

Learning the Language of Addiction Counseling Geri Miller, 2014-09-09 FULLY REVISED COMPREHENSIVE AND PRACTICAL Learning the Language of Addiction Counseling Fourth Edition introduces counselors social workers and students to the field of addiction counseling and helps them acquire the knowledge and develop the skills needed to counsel individuals who are caught in the destructive cycle of addiction Drawing from her years of experience working in the addiction counseling field Geri Miller provides an engaging balanced overview of the major theoretical foundations and clinical best practices in the field Fully updated the Fourth Edition offers a positive practice oriented counseling framework and features A research based clinical application approach to addiction counseling that practitioners can turn to for fundamental practical clinical guidelines Revised chapters that reflect important changes in research and practice including new DSMTM 5 criteria new assessment instruments and new and expanded treatments Case studies interactive exercises end of chapter questions and other resources that facilitate the integration of knowledge into practice Personal Reflections sections at the beginning of each chapter provide an invaluable unique perspective on the author s evolving views of addiction counseling Updated and expanded online Instructor s Manual that includes brief video clips PowerPoint slides test bank questions for each chapter and sample syllabi From assessment and diagnosis of addiction to preparing for certification and licensure as an addiction professional this comprehensive book covers all of the essentials

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