

# THERAPY PROGRESS NOTE

DATE OF SESSION	8/9/2023		
LOCATION OF SESSION	VIRTUAL	DURATION OF SESSION	45 minutes

## PATIENT DEMOGRAPHIC INFORMATION

CLIENT NAME	JOHN DOE	DATE OF BIRTH	12/12/2000
CURRENT PSYCHIATRIST	JON JOHNS, MD		

PRESENTING PROBLEM	Client reports feeling overwhelmed at work and has experienced episodes of panic over the past two weeks.
SESSION CONTENT	Client discussed recent challenges at work, including increased workload and interpersonal conflicts with a colleague. Expressed feelings of inadequacy and fear of making mistakes. Described a recent panic episode at work that resulted in taking a sick day. Briefly touched on childhood memories of high expectations and related feelings of anxiety.
INTERVENTIONS	Utilized cognitive restructuring to address maladaptive thought patterns, leading to feelings of inadequacy. Taught deep breathing and grounding exercises to manage acute anxiety. Explored past experiences that might contribute to current feelings of anxiety and fear of judgment.
CLIENT RESPONSE	The client was receptive to interventions and actively participated in cognitive restructuring exercises. Demonstrated understanding of deep breathing and grounding techniques. Became tearful when discussing childhood memories but expressed appreciation for the opportunity to explore these feelings.
ThERAPIST'S OBSERVATIONS	The client is motivated and engaged in therapy. Demonstrates good insight into patterns of behavior and thought. With continued work, I am hopeful that the patient will develop effective coping strategies for managing work-related stress and anxiety.

## MENTAL STATUS EXAMINATION

Client presents in casual attire, appearing stated age. Maintains appropriate eye contact throughout the interview and is cooperative, though somewhat reserved. Speech is of normal rate and volume, with clear articulation. Client describes mood as "okay" and affect is congruent, restricted but euthymic. Thought processes are linear and goal directed. Thought content is without any overt delusions, hallucinations, suicidal, or homicidal ideation. Cognition appears intact, alert and oriented to person, place, and time. Client demonstrates good immediate recall. Insight into current situation seems partially limited, and judgment appears adequate.

## RISK ASSESSMENT

No indications of suicidal or homicidal ideation. No concerns about harm to self or others currently.

## DIAGNOSTIC IMPRESSIONS

Major Depressive Disorder, Recurrent, Moderate  
Generalized Anxiety Disorder

## PLAN FOR NEXT SESSION

Continue to delve into past experiences and their connection to current feelings of anxiety. Begin discussing strategies for effective communication and assertiveness at work. Review homework assignments and progress in cognitive restructuring.

RETURN TO CLINIC Every week

Instructed the client to call our office immediately if symptoms worsen. Instructed the client to call 911 or go to the nearest emergency room if experiencing suicidal thoughts, homicidal thoughts, or any other medical and/or psychological crisis.

 8/9/2023  
JOHN DOE, LMFT, Psychotherapist

# Ohio Mental Health Progress Note

**William F. Maag Library**

**Ohio Mental Health Progress Note:**

**Current Catalog** National Library of Medicine (U.S.), First multi year cumulation covers six years 1965-70      **National Library of Medicine Current Catalog** National Library of Medicine (U.S.), 1971 First multi year cumulation covers six years 1965-70      **National Library of Medicine Catalog** National Library of Medicine (U.S.), 1966      *Ohio Documents Index* William F. Maag Library, 1983      **Ohio Documents**, 2003      New Serial Titles, 1989 A union list of serials commencing publication after Dec 31 1949      **Subject Catalog of the Institute of Governmental Studies Library, University of California, Berkeley** University of California, Berkeley. Institute of Governmental Studies. Library, 1971

**Ill-equipped** Sasha Abramsky, Jamie Fellner, 2003 Recommendations Background Who are the mentally ill in prison Mental illness and women prisoners Systems in transition Difficulties mentally ill prisoners face coping in prison Inadequate responses and abuses by correctional staff Inadequate mental health treatment in prisons Insufficient provision of specialized facilities for seriously ill prisoners Case study Alabama a system in crisis Mentally ill prisoners and segregation Suicide and self mutilation Failure to provide discharge services Legal standards      **Annual Report of the Ohio State Board of Agriculture** Ohio State Board of Agriculture, 1882 Reports for 1862-1866 include reports of the Ohio Pomological Society reports for 1857 include abstracts of proceedings of the county agricultural societies      **Monthly Checklist of State Publications** Library of Congress. Exchange and Gift Division, 1980 June and Dec issues contain listings of periodicals

*Oceanic Citation Journal with Abstracts*, 1970      **News from the State Library**, 1979      **National Union Catalog, 1980**, 1981      National Union Catalog, 1981 Includes entries for maps and atlases      **Subject Catalog, 1978** Library of Congress, 1978      **Government Reports Announcements & Index**, 1982      **The Behavior Therapist**, 1999      **Library of Congress Catalogs** Library of Congress,      *Library of Congress Catalog* Library of Congress, 1960 A cumulative list of works represented by Library of Congress printed cards      *Medical behavioral science: a selected bibliography of cultural Marion Pearsall*, 1963

This book delves into Ohio Mental Health Progress Note. Ohio Mental Health Progress Note is a crucial topic that must be grasped by everyone, ranging from students and scholars to the general public. The book will furnish comprehensive and in-depth insights into Ohio Mental Health Progress Note, encompassing both the fundamentals and more intricate discussions.

1. The book is structured into several chapters, namely:

- Chapter 1: Introduction to Ohio Mental Health Progress Note
- Chapter 2: Essential Elements of Ohio Mental Health Progress Note
- Chapter 3: Ohio Mental Health Progress Note in Everyday Life
- Chapter 4: Ohio Mental Health Progress Note in Specific Contexts
- Chapter 5: Conclusion

2. In chapter 1, this book will provide an overview of Ohio Mental Health Progress Note. The first chapter will explore what Ohio Mental Health Progress Note is, why Ohio Mental Health Progress Note is vital, and how to effectively learn about Ohio Mental Health Progress Note.
3. In chapter 2, the author will delve into the foundational concepts of Ohio Mental Health Progress Note. This chapter will elucidate the essential principles that must be understood to grasp Ohio Mental Health Progress Note in its entirety.
4. In chapter 3, this book will examine the practical applications of Ohio Mental Health Progress Note in daily life. This chapter will showcase real-world examples of how Ohio Mental Health Progress Note can be effectively utilized in everyday scenarios.
5. In chapter 4, the author will scrutinize the relevance of Ohio Mental Health Progress Note in specific contexts. This chapter will explore how Ohio Mental Health Progress Note is applied in specialized fields, such as education, business, and technology.
6. In chapter 5, this book will draw a conclusion about Ohio Mental Health Progress Note. The final chapter will summarize the key points that have been discussed throughout the book.

This book is crafted in an easy-to-understand language and is complemented by engaging illustrations. This book is highly recommended for anyone seeking to gain a comprehensive understanding of Ohio Mental Health Progress Note.

<https://crm.allthingsbusiness.co.uk/public/virtual-library/HomePages/Modern%20Algebra%20Solution%20Manual.pdf>

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