

Client Name: Last, First	Location of Service: Office
Date of Service: 12/20/2022	Length of Session: 33 minutes
CPT Code: 99214	Diagnosis/ICD Code: F32.1 MDD
Present at Session	
<input checked="" type="checkbox"/> Client Present <input type="checkbox"/> Client No showed/Cancelled <input type="checkbox"/> Others Present, List name(s) and relationship to client:	
Significant Changes in Client's Condition	
<input type="checkbox"/> No significant change from last visit	
<input checked="" type="checkbox"/> Mood/Affect	Mood moderately improved. More energy. Eye contact fair.
<input checked="" type="checkbox"/> Thought Process/Orientation	Increase in goal-oriented thought process.
<input type="checkbox"/> Behavior/Functioning	
<input checked="" type="checkbox"/> Substance Use	Ongoing alcohol use.
<input checked="" type="checkbox"/> Physical Health Issues	He has been to ER d/t vertigo. Pending neurologist appt.
<input type="checkbox"/> Other, Explain:	
Danger to:	
<input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property <input type="checkbox"/> None <input checked="" type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Means <input type="checkbox"/> Attempt	
Specifics Regarding Risk Assessment	
(Include safety planning, reports made, etc.)	
Client reports ongoing passive SI with no intent or plan. Reviewed safety plan.	
Evaluation Management (Include required number of elements based on E/M billed):	
History:	
<p>Client reports depressive symptoms starting when he was 13 years old, and symptoms have often impaired his ability to maintain work, relationships, and care for himself. Client reports alcohol use for past 15 years. Client reports recent stressors with upcoming holidays and feeling lonely as family lives far away . Discussed potential to increase meds, however client reports that he is able to manage extra stress with help of therapy and breathing exercises. Will keep meds at same dose and monitor for any worsening of symptoms over holidays.</p> <p>HTN on meds Chronic back pain Previous med trials: n/a Allergies: NKA</p> <p>Social history: Client lives with mother. Mother keeps meds in locked cabinet and dispenses. Works part time at dollar store.</p>	
Examination:	
<p>Client reported medication compliance 95% of the time. Client was educated on need to remain compliant with medication as prescribed and was given overview of risks of noncompliance. Provider reviewed potential side-effects of medication to include Effexor. Client reported moderate improvement in mood and energy levels. Reports cutting down alcohol use to 3-4 times/week.</p>	

Current medication(s)/medication change(s):

Effexor 75 mg daily

- Refills
- No side effects or adverse reactions noted or reported

Medical Decision Making:

Client to continue current medication plan.
f/u with primary physician in 4 weeks
discussed emergency resources

Lab Tests:

- Ordered
 - Reviewed
- Describe: None currently

Recommendations and/or Referrals

Client to attend AA meetings, reach out to sponsor and continue with therapist

Follow-up Appointment: Return in one month

Provider Information

Provider Signature & Credentials (if signature illegible, include printed name):

Dr. Caring Psychiatrist, MD

Date of Signature:

12/20/2022