

MAX

MAX SUPER SPECIALITY HOSPITAL

Department of Psychiatry and Mental Health

Press Enclave Road, Saket, New Delhi - 110017 | Tel: 011-2651-5050 | Fax:
011-2651-5051

CONFIDENTIAL: PATIENT MEDICAL RECORD

MENTAL HEALTH ASSESSMENT REPORT

Patient ID: MH-29845

Name: Sonalika Rawat

DOB: 15/09/1988 (36 years)

Gender: Female

Contact: +91 9876543210

Emergency Contact: Armaan Rawat - +91
9876123456

Primary Care Physician: Dr. Anil Sharma

Insurance: ICICI Prudential, #HP78392015

Date of Assessment: 8 April, 2025

Clinician: Dr. Priya Malhotra, MD,
Psychiatry

ASSESSMENT SUMMARY

Sonalika presented for his scheduled follow-up appointment reporting continued difficulties with persistent low mood and anxiety symptoms. He describes a modest improvement in sleep quality but ongoing challenges with energy levels and concentration at work. His self-reported questionnaire data indicates moderate anxiety with fluctuating mood states. Patient denies current self-harm ideation but acknowledges occasional passive thoughts without intent or plan.

KEY MENTAL HEALTH PARAMETERS

PHQ-9

16 (Moderate)

GAD-7

12 (Moderate)

Sleep Quality

5/10

Mood Rating

4/10

MENTAL HEALTH INDICATORS

Parameter	Score/ Rating	Clinical Notes
Mood	4/10	Patient reports consistant low modd, particularly in mornings
Anxiety	Moderate	Frequent worry, at times mildly overwhelming
Sleep Quality	5/10	Improvement with mdication, but still disrupted
Energy Levels	3/10	Moderate daytime fatigue despite improved sleeping
Physical Symptoms	Mild	Occasional headaches, muscle tension
Concentration	4/10	Difficulty sustaining focus on tasks
Self-Care	4/10	Minimal hygiene maintained, but diminished interest
Interests	3/10	Withdrawal from social altivities, limitet to family
Intrusive Thoughts	3/10	Recurring worry about work performance
Optimism	5/10	Limited positive future outlook
Social Support	6/10	Supportive family, limited extended network
Self-Harm Risk	Passive	Occasional thoughts without intent or plan

ADDITIONAL CLINICAL DATA

Stress Factors:

Patient identifies workplace demands as primary stressor. Recent project deadline extensions and supervisory criticism have exacerbated symplom. Financial concerns regarding potential medical leave also contributing factor. Home environment is described as suppotive but tense due to patient's condition.

Coping Strategies:

Patient reports inconsistent application of breathing exercises and guided meditation (2-3 times weekly). Evening walks with family members (weather permitting). Has discontinued journaling practice previously established. Reports occasional use of alcohol to "wind down" in evenings.

Discussion About Professional Support:

Patient expresses willingness to continue medication regimen and is open to increasing therapy frequency from biweekly to weekly sessions. Has expressed interest in group therapy options but concerns about scheduling conflicts. Ambivalent about workplace accommodations due to stigma concerns.

ASSESSMENT & RECOMMENDATIONS

Clinical Impression

Patient presents with symptoms consistent with Moderate Major Depressive Disorder (F33.1) with anxiety features. Current PHQ-9 score of 16 indicates moderate depression. GAD-7 score of 12 indicates moderate anxiety. Symptoms appear to be exacerbated by workplace stressors with inadequate coping mechanisms.

Treatment Recommendations

- Continue Escitalopram 10mg daily, monitor for side effects
- Increase therapy to weekly sessions, focusing on CBT techniques
- Consider workplace accommodations letter
- Sleep hygiene reinforcement
- Gradual reintroduction of social activities
- Alcohol use reduction plan
- Possible referral to occupational therapy for workplace stress management

Safety Plan

Patient and family have reviewed crisis contact information. Patient agrees to contact clinic or crisis services if self-harm thoughts intensify. Support person aware of medication location and monitoring plan. Emergency contact numbers provided for 24/7 crisis helpline.

FOLLOW-UP PLAN

Next Appointment: 24 April, 2025 at 10:30 AM

Medication Review: 15 May, 2025

PHQ-9/GAD-7 Reassessment: At next visit

Care Coordination: Communication with PCP requested regarding recent physical symptoms

Electronically Signed:

Dr. Priya Malhotra, MD

Senior Consultant Psychiatrist

License #: DMC/R/12345

Digital signature

Digitally signed on 10/04/2025 11:32 AM IST

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Max Super Speciality Hospital | Press Enclave Road, Saket, New Delhi - 110017
Tel: 011-2651-5050 | Fax: 011-2651-5051 | www.maxhealthcare.in