<<First Name>> <<Last Name>> is a <<AGE>>-year <<MONTH>>-month old, <<Sexual Orientation>>, <<**Gender Identity**>> of<<What is your cultural heritage?>>-descent who lives in <<**Where was the patient born?>>** with <<his her>> <<**With whom does the patient currently live?>>**. <<First Name>> is in <<his her>> year at \*\* School \*\* in town, state. <<He She>> also reported participating in extracurriculars. <<He She>> reports **<<Please describe social supports.>>**

**<<If in a relationship, please describe the nature of the relationship and length of time together.>>**

**<Does the patient feel safe in the relationship?>>  
<<Please check any of the following that apply>>**

**<<History of Abuse or Neglect?>>**

**<<Any CPS Contact?>>**

**<<Any history or Interaction with Legal System/Legal Concerns?>>**

<<**Please list all schools, grades attended.>>**

<<He She>> has most recently completed <<**What is the patient's highest level of education?>> at <<Where did they attend school for the highest level of education?>>. <<He She>> has <<Has the patient ever repeated a grade?>>. Regarding special accommodations, <<First Name>> <<Special accommodations?>>.  
  
<<First Name>> also reports that <<he she>> has <<Any diagnoses for learning disorders or ADHD?>>. <<He She>> further reports that <<he she>> <<IEP or 504 plan?>>. <<First Name>> <<Any problems at school?>>.  
  
<<First Name>>’s current hobbies and recreational activities include <<What are current hobbies or activities?>>.**

<<First Name>> <<**What has prompted the evaluation at this time?>>**

<<He She>> has difficulty <<**Please check any of the following that apply>>**

<<He She>> reports that sleep is punctuated by <<Sleep **Concerns?>>.**

<<He She>> reported symptoms. <<He She>> also reported that <<he she>> has <<**Does the patient have a psychiatric diagnosis?>>. Regarding previous psychiatric hospitalizations, <<he she>> noted that they have <<Has the patient ever been hospitalized for a psychiatric issue?>>.**

**Therapeutic history includes <<Does the patient currently see a therapist or have seen one in the past?>>. Family mental health history includes <<Is there a history of mental illness in the family?>>.**

**<<Anxiety>>**

**<<Depressed Mood>>**

**<<Impulsivity>>**

**<<Hyperactivity>>**

**<<Distractibility>>**

**<<Inattention>>**

**<<Tantrums>>**

**<<Self-Injurious Behaviors>>  
<<Somatic Complaints>>**

**<<Worry>>**

**<<Fear>>**

**<<Appropriate Stranger Danger>>**

**<<Risk/Danger awareness>>**

**<<Obsessive Thoughts>>  
<<Repetitive Behaviors or Habits>>**

**<<Aggression>>**

**<<Hallucinations/Delusions>>**

**<<Substance Use>>**

**<<Sexual History>>  
<<Social Connections>>**

**Social Support information**

**<<Please note the patient's strengths.>>**

**<<Is there anything else that you would like me to know?>>**

| **Birth & Early Development** | <<First Name>> <<Last Name>> was born on <<DOB>> after gestational information. <<He She>> was born full-term. Labor and delivery were considered uncomplicated.  Developmental milestones were largely met. <<First Name>> <<Last Name>>s fine motor and gross motor development was within normal limits. <<His Her>> speech and communication development were considered early. <<He She>> experienced no sensory processing concerns nor any developmental regression.  <<First Name>> <<Last Name>> reported that <<he she>> often would interject and talk over others. When younger, <<he she>> noted that <<his her>> teachers would often reprimand <<his her>> for interrupting. |
| --- | --- |
| **Medical  History** | <<First Name>> <<Last Name>>’s health was reported as good at initial intake for assessment with reported somatic concerns such as stomachaches and headaches. Their medical history is notably unremarkable.  Regarding diet, <<First Name>> <<Last Name>> described <<his her>> diet as a typical American diet, stating <<he she>> tried to be healthy. <<He She>> noted that <<he she>> does not eat breakfast in the morning. <<He She>> noted that <<he she>> has a concern about <<his her>> caffeine consumption. <<He She>> reported that there is a culture around caffeine consumption in <<his her>> school and friend group that <<he she>> feels <<he she>> needs to be a part of. <<He She>> reports that <<he she>> tends to drink coffee in the morning in addition to two energy drinks throughout the day though <<he she>> notes that <<he she>> can go without caffeine if necessary. <<He She>> reported no medication use and no substance use. |
| **Social & Emotional Functioning** | <<First Name>> <<Last Name>> described having strong social supports in <<his her>> family and friends. <<He She>> reported swimming and playing water polo for <<his her>> high school. <<He She>> has previously engaged in mental health care, seeing a therapist, Peggy Haber since November. |
| **Academic History** | At time of assessment, <<First Name>> <<Last Name>> had completed their 11th grade at \*\* High School in \*\*, WA. <<He She>> attended \*\* Middle School in \*\*, WA. <<First Name>> <<Last Name>> noted that <<he she>> tends to have As in high school. Reports from <<his her>> middle school and high school teachers report a dedicated student who was a pleasure to have in class and consistently produced excellent work. |