

CLINICAL/CASE PRESENTATION FORMAT DMH/DHS COLLABORATION PROGRAM

Demographic Information: This should be a very brief overview of the person for whom you are seeing psychiatric consultation to include:

- Name, age, marital status, gender, occupation, language, race, religion (if relevant);
- With whom does person live;
- Prior treatment for similar condition including hospitalization.

Chief complaint: Why the patient was referred in his/her own words.

Please be prepared to discuss the following with the consulting psychiatrist:

- Depressive symptoms
- Bipolar symptoms
- Anxiety symptoms
- Psychotic symptoms
- Substance Use/Abuse
- Other (Cognitive, Eating Disorder, Personality traits)
- Past treatment including response to treatment
- Safety/Suicidality
- Relevant psychosocial factors
- Medical problems
- Current medications
- Functional impairment(s)
- Patient goals
- Mental Health Diagnosis (If you are not quite sure of the specific diagnosis you may use an NOS diagnosis or defer until you are certain - if that is the case, seek consultation or supervision as your diagnosis should inform the treatment)