

This is a fictitious case. All names used in the document are fictitious

Recipient Information

Name: Jill Spratt

Medicaid Number: 12345678

Number of Group Members (GT only):

Family Members Present (FT only):

Jill Spratt, client

Jack Spratt, father

Provider Information

Name: Thumb Psychological Assoc.

Medicaid Number: 987654321

Therapist Name: Tom Thumb, Ph.D.,
Licensed Psychologist

Date of Service: 10-23-06

Begin & End Time: 3:00 p.m.–4:00 p.m.

Type of Service : Family Therapy 90847

Service Setting: Office

Sample Progress Note

Patient report of recent symptoms/behaviors: (R/T DX & TX Plan)

Jill denied any suicidal ideation in the past week. She reported that she still feels sad most of the time. Her father reported that she continues to be easily irritated. Both agreed that she and her step-mother continue to have conflicts several times a day.

Session Note: (include therapist clinical intervention & patient response)

Jill and her father brought their homework assignment—the plan the family made to increase communication and family activities. The plan included a family movie night on Wednesdays and a family meeting on Mondays. Jill and her father also agreed to set aside 15 minutes each afternoon after Jill comes home from school and before he goes to work for the two of them to talk.

This session focused on Treatment Plan Problem 2, Goal 3, learning communication and conflict resolution skills. Education was provided on steps of conflict resolution: clear the air, “time out”, set ground rules, listen to the other side, summarize what the other person said, share your point of view, brainstorm solutions, weigh pros and cons, be willing to compromise, and agree on solution(s) to try. Jill and her father were given handouts of the steps and we discussed them. After both understood the steps, Jill and her father were encouraged to practice using them in the session, with coaching from this therapist. Jill chose to discuss her feelings that being grounded for a month because she got an “F” on a test is too strict. Both were able to utilize the initial steps. Mr. Spratt gave his side first. He tended to lecture and criticize, and as he did Jill appeared to withdraw. We reviewed some of the skills of good communication we have worked on in previous sessions and he was coached to express his point without lecturing. However, by this time Jill appeared to have shut down and she did not respond. Jill was given the option of taking a “time out” in the waiting room to calm down and she chose to do this. When she returned in 5 minutes it was apparent that she had been crying, but she was calmer and able to express her point of view. She explained to

her father the work in her current math class is much harder than what she was doing in her old school. She explained that she is trying hard, but often doesn't understand what her teacher is talking about. She shared how frustrating it has been to switch schools so often and always have to struggle to catch up. Mr. Spratt was able to summarize her feelings, and he was able to indicate he understood without lecturing or criticizing. He indicated that he felt it was progress that Jill was able to calm down, return and continue the discussion after she got upset.

Mr. Spratt and Jill were given the homework assignment of practicing the conflict resolutions steps at least two times this week. They were instructed to practice on minor issues, such as what movie to watch.

Patient progress towards treatment plan goal(s):

The family has established times for communication and family activities but has not yet begun to implement them (Problem 2, Goal 2)

Mr. Spratt and Jill have begun to learn steps for conflict resolution, but still need coaching in order to utilize them (Problem 2, Goal 3).

Name/Title Tom Thumb, Ph.D. **(Must be an original or electronic signature
Stamped Signatures are not acceptable)**

Date 10/23/06
(Completion)