

DRAFT: MODIFIABLE MENTAL HEALTH CLINIC REPORT

Black text to be derived and automatically generated from parent self-administered KSADS-COMP data. Information in red and other text as desired to be added by the clinician.

Identifying Information/Reason for Referral: The client is a 15-year-old Hispanic youth, who was born a biological male, but identifies as non-binary. They live with their biological mother and stepfather in **LOCATION TO BE ADDED**. The client's biological father passed away when they were twelve. The client first received outpatient mental health treatment beginning at age six, has received psychotherapy and medication management in the past, but is not currently prescribed any psychotropic medication. The client was referred for this evaluation due to **INFORMATION TO BE ADDED BY CLINICIAN**.

Current School/School Functioning: The client is enrolled in a private school, **SCHOOL NAME TO BE ADDED BY CLINICIAN**, and is in the 10th grade. In the recent past, there has been a significant drop in the client's grades. They are currently failing academically. The client does not receive any specialized services at school and has had no detentions or suspensions in the past year.

Extracurricular: The client is involved in theatre at school and participates in dance outside of school.

Developmental History: The client was born full-term, and their developmental milestones were reportedly within normal limits.

Medical Health Problems/Medications: The client has been diagnosed with asthma and is currently prescribed **MEDICATION TO BE ADDED BY CLINICIAN** for this condition.

Mental Health Treatment History: As noted in the identifying information section, the client first received outpatient mental health treatment beginning at age six, has received psychotherapy and medication management in the past, but is not currently prescribed any psychotropic medication. **INFORMATION ON REASON FOR PAST TREATMENT AND NATURE OF PAST TREATMENT CAN BE ADDED BY CLINICIAN**.

Family History Psychiatric and Substance Use Disorders: Family history is reportedly positive for depression (biological father, grandmother), substance use problems (biological father, grandfather, uncle), and suicide completion (biological father).

Guns in Home: Guns in home are reportedly kept unlocked. **CLINICIAN TO REVIEW SAFE FIREARM STORAGE WITH CAREGIVER** – e.g., Firearms should be stored unloaded and in a locked location, separate from ammunition.

Trauma History: The following lifetime significant traumas were reported: domestic violence exposure, community violence, and unexpected death of a loved one.

TRAUMA SECTION CAN BE EXPANDED BY CLINICIAN.

Other Current Stressors: No current stressors were endorsed.

Relationships/Gender Identity/Sexual Orientation: The client's biological mother reported a lot of conflict in their relationship, primarily related to the client's moods and grades.

The client reportedly has a best friend, and problems with bullying were reported.

The client identifies as non-binary and pansexual.

RELATIONSHIP SECTION CAN BE EXPANDED BY CLINICIAN.

Measures Completed:

Questions on the web-based KSADS-COMP child psychiatric diagnostic assessment tool were completed independently by the client's biological mother. Caregivers and youth often report different symptoms. According to the client's biological mother, the client met diagnostic criteria for Major Depressive Disorder and Posttraumatic Stress Disorder.

Mental Status/Safety Planning: (TO BE COMPLETED BY CLINICIAN)

Note: The following items were also endorsed by the client's caregiver: self-injurious behavior (current) and suicidal ideation (current).

Diagnostic Formulation: The client is a 15-year-old Hispanic youth, who was born a biological male, but identifies as non-binary. They live with their biological mother and stepfather in **LOCATION TO BE ADDED**. The client's biological father passed away when they were twelve. The client first received outpatient mental health treatment beginning at age six, has received psychotherapy and medication management in the past, but is not currently prescribed any psychotropic medication. The client was referred for this evaluation due to **INFORMATION TO BE ADDED BY CLINICIAN**.

According to the parent self-administered KSADS-COMP assessment, the client met criteria for Major Depressive Disorder. The following current symptoms were endorsed: depressed mood, irritable mood, concentration problems, insomnia, fatigue, low self-esteem, guilt, and suicidal ideation.

According to the parent self-administered KSADS-COMP assessment, the client also met criteria Posttraumatic Stress Disorder, secondary to the traumas discussed above. The following current symptoms were endorsed: nightmares, flashbacks, recurrent thoughts of traumas, avoidance of places associated with the trauma, persistent negative emotional states, feelings of detachment, irritable mood, concentration problems, and insomnia.

DIAGNOSTIC FORMULATION TO BE FINALIZED BY CLINICIAN BASED ON INTERVIEW AND ANY ADDITIONAL QUESTIONNAIRES COMPLETED BY YOUTH.

THE CLINICIAN SHOULD WORK WITH THE CAREGIVER TO PRIORITIZE THE FOCUS FOR CLINICAL INTERVENTION AND FURTHER EVALUATION MAY BE INDICATED FOR DIFFERENTIAL DIAGNOSTIC PURPOSES.

Treatment Planning/Disposition: TO BE COMPLETED BY CLINICIAN.