CASE WRITE-UP: SUMMARY AND CONCEPTUALIZATION

**PART ONE: INTAKE INFORMATION**

**IDENTIFYING INFORMATION AT INTAKE:**

**Age:** Click or tap here to enter text.

**Gender Identity and Sexual Orientation:** Click or tap here to enter text.

**Cultural Heritage:** Click or tap here to enter text.

**Religious/Spiritual Orientation:** Click or tap here to enter text.

**Living Environment:** Click or tap here to enter text.

**Employment Status:** Click or tap here to enter text.

**Socioeconomic Status:** Click or tap here to enter text.

**CHIEF COMPLAINT, MAJOR SYMPTOMS, MENTAL STATUS, AND DIAGNOSIS:**

**Chief Complaint:** Click or tap here to enter text.

**Major Symptoms:**

**Emotional:** Click or tap here to enter text.

**Cognitive:** Click or tap here to enter text.

**Behavioral:** Click or tap here to enter text.

**Physiological:** Click or tap here to enter text.

**Mental Status:** Click or tap here to enter text.

**Diagnosis (from the Diagnostic and Statistical Manual or International Classification of Disease):** Click or tap here to enter text.

**CURRENT PSYCHIATRIC MEDICATIONS, ADHERENCE, AND SIDE EFFECTS; CONCURRENT**

**TREATMENT:** Click or tap here to enter text.

**CURRENT SIGNIFICANT RELATIONSHIPS:** Click or tap here to enter text.

**PART TWO: HISTORICAL INFORMATION**

**BEST LIFETIME FUNCTIONING (INCLUDING STRENGTHS, ASSETS AND RESOURCES):** Click or tap here to enter text.

**HISTORY OF PRESENT ILLNESS:** Click or tap here to enter text.

**HISTORY OF PSYCHIATRIC, PSYCHOLOGICAL OR SUBSTANCE USE PROBLEMS AND IMPACT ON FUNCTIONING:** Click or tap here to enter text.

**HISTORY OF PSYCHIATRIC, PSYCHOLOGICAL, OR SUBSTANCE ABUSE TREATMENT, TYPE, LEVEL OF CARE, AND RESPONSE:** Click or tap here to enter text.

**DEVELOPMENTAL HISTORY (Relevant Learning, Emotional, and Physical Development):** Click or tap here to enter text.

**PERSONAL, SOCIAL, EDUCATIONAL, AND VOCATIONAL HISTORY:** Click or tap here to enter text.

**MEDICAL HISTORY AND LIMITATIONS:** Click or tap here to enter text.

**CURRENT NON-PSYCHIATRIC MEDICATIONS, TREATMENT, ADHERENCE, AND SIDE EFFECTS:** Click or tap here to enter text.

**PART THREE: THE COGNITIVE CONCEPTUALIZATION DIAGRAM (CCD)**

Please include a completed CCD with this case write-up.

**PART FOUR: THE CASE CONCEPTUALIZATION SUMMARY**

**HISTORY OF CURRENT ILLNESS, PRECIPITANTS AND LIFE STRESSORS:** Click or tap here to enter text.

**MAINTAINING FACTORS:** Click or tap here to enter text.

**VALUES AND ASPIRATIONS (NOTE—THIS IS AN OPTIONAL ITEM AND WILL NOT BE SCORED):** Click or tap here to enter text.

**NARRATIVE SUMMARY, INCORPORATING HISTORICAL INFORMATION, PRECIPITANTS, MAINTAINING FACTORS, AND COGNITIVE CONCEPTUALIZATION DIAGRAM INFORMATION:** Click or tap here to enter text.

**PART FIVE: TREATMENT PLAN**

**OVERALL TREATMENT PLAN:** Click or tap here to enter text.

**PROBLEM LIST/CLIENT’S GOALS AND EVIDENCE-BASED INTERVENTIONS (INCLUDE UP TO FIVE):**

**Problem/Goal #1:** Click or tap here to enter text.

**Interventions:** Click or tap here to enter text.

**Problem/Goal #2:** Click or tap here to enter text.

**Interventions:** Click or tap here to enter text.

**Problem/Goal #3:** Click or tap here to enter text.

**Interventions:** Click or tap here to enter text.

**Problem/Goal #4:** Click or tap here to enter text.

**Interventions:** Click or tap here to enter text.

**Problem/Goal #5:** Click or tap here to enter text.

**Interventions:** Click or tap here to enter text.

**PART SIX: COURSE OF TREATMENT AND OUTCOME**

**THERAPEUTIC RELATIONSHIP:** Click or tap here to enter text.

**NUMBER AND FREQUENCY OF TREATMENT SESSIONS, LENGTH OF TREATMENT:** Click or tap here to enter text.

**COURSE OF TREATMENT SUMMARY:** Click or tap here to enter text.

**MEASURES OF PROGRESS:** Click or tap here to enter text.

**OUTCOME OF TREATMENT:** Click or tap here to enter text.