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Progress - CCC

Note Date: 10/27/16

Signed by (CLINICAL SOCIAL WORKER), LICSW on 10/27/16 at 3:28 pm

Affiliation: MEDICAL CENTER

SOCIAL WORK - AMBULATORY SERVICES

Progress Note

CLINICAL DATA: (Relevant Subjective and Objective Information including session length and #; mental status including SI/HI.)

45 minute solution focused psychotherapy

Problems addressed:

adj to illness

family strain

Focus today is stressful relationship w/sister who provides financial support in many arenas for pt. Pt feels sister doesn't appreciate her perspective around the financial dependency. Pt views sister as often very critical and unkind. It triggers for pt feelings she had growing up w/ mother who could also exhibit these behaviors. Pt comes from appointment earlier with Dr. S. Per her report, recent MRI showed stability in terms of new lesions, but some abnormalities "that explain my cognitive problems" which is some relief for her. She has been referred to a neuropsychologist and she hopes tha can provide some help w/her organizational problems. She now volunteers regularly with a local agency in her home town. She is upset by strife with her 15 yo dtr who is critical of pt's behavior and cognitive problems.

MSE: Pt late for session (she had an earlier appointment she had forgotten about when she scheduled with me). She is casually dressed and engages actively in session w/full range of affect. Mood again this visit is somewhat discouraged and irritable in discussion about tension w/her sister. She feels interactions w/her teenaged children is more difficult; esp w/dtr. Pt continues to meet regularly w/community psychiatrist who manages her meds. She has ongoing challenges w/paperwork and organizational tasks. She's been referred to a neuropsychologist. As above, she gets pleasure from activity in volunteer role where she feels valued and smart. Insight and judgment are good. She makes good use of sessions and feedback.

CLINICAL ASSESSMENT: (Brief summary of pertinent information relative to problems listed. Note additional problems or changes in rationale of treatment.)

Patient w/Parkinson's, psychosocial stressors and related mood problems. She actively uses sessions and feedback. Regular meetings can be challenged by her organizational problems resulting in lateness or cancelled appts.

PLAN:

May f/u

explore dynamics between pt and sister

collaborate w/neuropsychologist around referral

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