

Client Name: Last, First	Location of Service: ILF
Date of Service: 12/20/2022	Length of Session: 45 minutes
CPT Code: 99215	Diagnosis/ICD Code: F25.0 schizoaffective disorder
Present at Session	
<input checked="" type="checkbox"/> Client Present <input type="checkbox"/> Client No showed/Cancelled <input checked="" type="checkbox"/> Others Present, List name(s) and relationship to client: ILF staff	
Significant Changes in Client's Condition	
<input type="checkbox"/> No significant change from last visit	
<input checked="" type="checkbox"/> Mood/Affect	Mood irritable. More energy.
<input checked="" type="checkbox"/> Thought Process/Orientation	Increase in paranoid ideation.
<input checked="" type="checkbox"/> Behavior/Functioning	Client becoming increasingly guarded and isolative to self.
<input type="checkbox"/> Substance Use	
<input checked="" type="checkbox"/> Physical Health Issues	Back pain, diabetes, lupus.
<input type="checkbox"/> Other, Explain:	
Danger to:	
<input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property <input type="checkbox"/> None <input checked="" type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Means <input type="checkbox"/> Attempt	
Specifics Regarding Risk Assessment	
(Include safety planning, reports made, etc.)	
Client reports ongoing passive SI with no intent or plan. Reviewed safety plan.	
Evaluation Management (Include required number of elements based on E/M billed):	
History:	
35-year-old male seen for follow up visit for psychosis.	
<p>Client reports psychotic symptoms starting when he was 22 years old. Client reports that his symptoms have often impaired his ability to maintain work, relationships, and care for himself. Client has co-occurring medical issues and is current on disability. He resides in an ILF. Client has history of inpatient hospitalization due to delusions of persecution. Last hospitalization was on 01/2018. Client has history of taking the following medications with good result: Abilify, Invega & Haldol PRN</p>	
Examination:	
<p>Patient doing well until 2 days ago when, for no apparent reason, he refused to leave his bed and appeared extremely preoccupied and depressed AEB continuously asking house manager if there are cameras in his bedroom. He is sleeping more and needs reminders to eat.</p> <p>Client reported medication compliance 100% of the time w/ prompts from ILF however there are concerns client is not taking his meds due increased psychosis. Client was educated on need to remain compliant with medication as prescribed and was given overview of risks of noncompliance. Provider reviewed potential side-effects of medication. ILF staff reported that client appears delusional evidenced by client fear of food contamination, being recorded, and believes staff are conspiring against him.</p> <p>Client reports last PCP apt 3 months ago. Ongoing medical issues are also impacting his ability to complete daily tasks.</p>	
Current medication(s)/medication change(s):	
Abilify 5mg qd Invega 6mg qd Haldol 5mg PRN Consider LAI	

Prednisone
Gabapentin
Insulin

- Refills
- No side effects or adverse reactions noted or reported

Medical Decision Making:

Coordinate care w/ PCP and see if there is alternative to prednisone for lupus tx. Consider change of antipsychotic to depot formulation. Staff agree to report any increase in symptom severity. Will consider brief hospitalization, should delusions continue to interfere with ADLS and/or inability to maintain safety in the ILF.

Lab Tests:

- Ordered
- Reviewed

Describe: Lab tests reviewed CMP/CBC/lipids WNL. HBA1c elevated at 6.8%- up from 6.5% on 6/2/21. Weight and waist circumference unchanged since last check 3 months ago. None currently

Recommendations and/or Referrals

Staff with follow up as needed. Client will continue to attend corner clubhouse for socialization. PCP to follow up for diabetes management. ILF staff to notify PCP if any medical concerns arise. Client sees therapist weekly with next appt on 12/22/21. This MD to coordinate with therapist and PCP as needed.

Follow-up Appointment: Return in one week

Provider Information

Provider Signature & Credentials (if signature illegible, include printed name):

Dr. Caring Psychiatrist, MD

Date of Signature:

12/20/2022