

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 4/5/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 4/5/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxiety
2. Family discord

Start Time: 3:00 PM
End Time: 3:40 PM
Duration of Session: 40 minutes
Session Type: 90834: Psychotherapy, 38-52 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good!"

Objective:
Appearance: Healthy, Well-groomed, Relaxed posture and Comfortable
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

-Leila continues to want to change rooms at her fathers house but is nervous to ask.

Practiced and role played worst case outcome.

-Leila wants to speak with father about being on phone while driving. Helped her shift from "telling" an adult what to do to asking and sharing why this is important to her.

-Leila did not bring up OCD but when queried shared that she does experience this "sometimes". Compulsions seem to be primarily repetitive behaviors (ie, a number of steps, spinning, blinking). Anxiety seems to be general. Discussed OCD and the treatment for this. Briefly reviewed ERP. Leila feels confident can do. Reviewed with mother.

-Excoriation Disorder may also be present. Will speak further about next visit.

Plan:

1. Continue psychotherapy as described in treatment plan.

2. Patient and/or their family knows to contact me if needed.

3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

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