

INTAKE QUESTIONS

DISCUSS HIPAA, PRIVACY RIGHTS ETC.

DISCUSS CANCELLATION POLICY AND HOW INSURANCE/BILLING PROCESS WILL WORK

Have you ever been in therapy before?

Positive	Negative
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Why?

Relevant Medical hx:

Relevant Mental Health hx:

Mental Health medications:

What do you hope to gain from our time together? GOALS

INTAKE QUESTIONS

Social Assessment:

Married or dating?	Yes	No
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Name:

How long:

Children	Yes	No
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How many, ages, genders, names?

Do you work? What do you do?

Does your spouse/significant other work? What do they do?

INTAKE QUESTIONS

Who do you live with? (Social support system - dont forget the pets)

Extended family involved in your life (parents, in-laws, grandparents, cousins etc.)

Any legal history that might have an impact on what we will discuss here and work on?

Any substance abuse history? (ETOH) (Prescriptions drugs) (Illegal drugs) (Marijuana)

Anything else that you think I should know about you that may impact the work that we do together here?