PATIENT 1

Patient is a 54-year-old Caucasian female with diagnosis of GAD, MDD, PTSD and history of alcohol abuse. She came for a follow up visit today. Patient is currently on Abilify 2 mg PO daily, Buspar 10 mg three times a day, Lamictal 200 mg PO daily and Mirtazapine 15 mg PO daily at bedtime. When asked how she was doing today he reports everything has been going "ok". Patient continued, "I think for me, I'm in a better place with the medication" She reports increase anxiety. She states that her PTSD has gotten worse because of upcoming court case coming. Patient said she is having issue with her exhusband. Her ex-husband is mad at her because she owes him some money which started when she filled for child support. She said that she has no job and unable to pay him now. She always looks over her shoulder once or twice a week being paranoid because it's always in her head someone is behind her or going to harm her. Patient voiced; she cries all the time. She said that the issue has been reported to the police in the past. She reports that this is the first time she has been inside because her husband traveled. Patient voiced that she lives in Pasadena and her ex-husband lives in another town but comes to Pasadena for appointment. She also reports family stress due to her father illness and her mother is unable to care for him due to old age and everything is falling on her. She goes to her parent's house to cool and clean their house. She reports that she found a therapist at the new life center when she attends alcohol class every two weeks for 45 minutes whom she has shared most of her problems and she is happy with the services se receives.

Patient is 54-year-old Caucasian female alert and oriented x 4. Patient denies any loss of appetite and sleeps well at night. Her thought processes are content and no evidence of delusional ideation. Patient dressed appropriately to weather and season. She is generally pleasant and cooperative. Her speech normal. Thought processes coherent. Patient maintained good eye contact throughout the interview but with low mood. Affect is restricted. She denies suicidal and homicidal ideations. Education provided on the possible side effects of medications and to call 911 and go to a nearby hospital if she is suicidal or