# Intake Note/Diagnostic Summary

### (CPT Code 90791)

**Client name:**

**DOB:**

**Gender:**

**Marital status:**

**Chief complaint/presenting problem:**

**Current symptoms:**

**History of the present illness (HPI):**

**Mental health history (Dx, IOP, hospitalizations):**

**Family mental health history:**

**Trauma history (including domestic violence):**

**Developmental history:**

**Education:**

**Legal history:**

**Vocation/occupation:**

**Military service:**

**Living situation:**

**Social support:**

**Prescriber name, contact info:**

**Psychiatric medications:**

**Medical history:**

**Substance use:**

**Risk assessment:**

*Low, moderate, or high risk (safety plan included for high risk)*

*Suicidal, homicidal, domestic violence/harm to others, other*

**Other additional info:**

**Community resources:**

**Client strengths:**

**Barriers to treatment:**

**Diagnosis:**

**Plan:**