Biopsychosocial Template

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| Initials: | Age: Weight: Occupation: |
| Chief presenting complaint:  History of present illness:  Pattern of presenting illness (depression, alcohol, drug use, etc.):  Current and recent stressors:  Current coping skills:  Spirituality and/or religion:  Client and family’s perception of alcohol or drug consumption: | Known allergies, hives, anaphylaxis (food, pollens, drugs, vaccines):  History of adverse drug responses (bad side effects): |
| Past medical history (medical history, treatment and outcomes, recent and past hospitalizations, surgeries):  Family medical history:  Prescription drugs (include list of prior and current medications): | Dose and frequency: |
| Non-prescription drugs/OTC |  |
| Smoking history: | Alcohol use: |
| Herbals:  Complementary treatments: | Illicit drugs:  Marijuana: \_\_\_\_\_\_ Legal/medical use: \_\_\_\_\_\_  Cocaine: \_\_\_\_\_\_  Heroin: \_\_\_\_\_\_  Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Substance use history (for each substance, identify the type and details to include: duration, frequency, last use; blackouts; withdrawal seizures; drug-related psychosis):  Legal, psychosocial, physical, interpersonal, and occupational consequences: |
| Include exposure to prescription opioids (reasons for use, duration, frequency etc.), psychotropic medications, side effects, adverse side effects, and treatment response: | Addiction (shopping, gambling, pornography, video, gaming, etc.):  Shoplifting: |
| Medication question(s):  Sociocultural history (family and social history, work history, current employment, volunteer work, legal history, active and past, current support system, marital status, and children):  Trauma history:    Trauma exposure (childhood abuse or neglect, rape or sexual assault, emotional abuse, domestic violence, military/combat service, and natural disasters):  History of head injury, loss of consciousness, seizures: | Past psychiatric history (psychiatric history/treatment and outcomes, recent and past psychiatric or substance abuse hospitalizations, residential or outpatient treatments):  Family psychiatric history and/or substance use history: |