Jocelyn Womack, MA, LPC

3617 Pioneer Parkway
Pantego, TX 76013
817-275-3617

Client name_____

Please complete the following questions in this self assessment:

1. Briefly, what is happening in your life which resulted in this appointment?_____
   _____
   _____
2. What would you like to see accomplished in therapy?_____
   _____
   _____
3. I am seeing Doctor_____ or Psychiatrist_____
   for the following mental health and/or other medical reasons:
   _____
   _____
   _____

CURRENT (C) PAST(P) COMPLAINT (MARK ALL THAT APPLY TO YOU):

__Depression

__Low energy

__Low self-esteem

__Poor concentration

__Hopelessness

__Worthlessness

__Guilt

__Sleep disturbance(more/less)

__Appetite disturbance (more/less)

__Thoughts of hurting yourself

__Thoughts of hurting someone

__Isolation/social withdrawal

__Family problems

__Feeling that you are not real

__Feeling that things around you aren't real

__Lose track of time

__Unpleasant thoughts that won't go away

__Anger/frustration

__Easily agitated annoyed

__Excessive use of drugs or alcohol

__Confusion

__Blackouts

__Physical abuse issues

__Sexual abuse issues

__Partner abuse issues

__Self harm

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__Parenting issues

__Fear of dying

__Nausea

__Obsessions/compulsive behavior

__Thoughts racing

__Can't hold onto an idea

__Stress

__Anxiety/panic

__Heart pounding/racing

__Chest pain

__Trembling/shaking

__Sweating

__Delusions/hallucinations

__Fear of going crazy

__Phobias

__Marital problems

__Other_____

_____

Have you ever experienced a traumatic event? If yes, briefly describe_____

_____

_____

Have you seen a psychiatrist or counselor before? If yes, when?_____

Name of provider_____

What was accomplished?_____

Current medications_____

_____

_____

Who prescribed your medications?_____

Previous psychiatric hospitalizations?_____

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Client name_____

Primary care physician:_____

Last medical exam:_____

List any medical problems you are currently experiencing:_____

_____

_____

Your counselor will be happy to answer any questions you have about any of the above information.