Listed below are samples of treatment plans. You are welcome to use the treatment plans as examples for creating your own treatment plans.

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/933e6674fb07fe17/diagnosis_treatment_plans/16770367) **- Priscilla**

2:59PM

**Diagnosis:**

F33.1 - Major depressive disorder, recurrent, moderate

**Presenting Problem**

Charlotte reported experiencing symptoms of depression that leads to inability to get out of bed, not going to work, isolating from her social supports and boyfriend, sadness, chest pain, and frustration. She also reported times of tearfulness, anhedonia, avolition, irregular eating and sleeping, feelings of worthlessness and helplessness, social anxiety, somatization, racing thoughts, and mood lability. Charlotte reported being impacted personally, interpersonally, and vocationally.

**Goal**

Charlotte will manage symptoms of depression and anxiety.

**Objective**

Charlotte will manage symptoms of depression and anxiety.

Charlotte will increase pleasureable activities and natural supports.

Charlotte will increase self-efficacy.

**Treatment Frequency**

Every 1-2 weeks

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/51aa090af377df5e/diagnosis_treatment_plans/16058898) **- Priscilla**

10:59AM

**Diagnosis:**

F43.21 - Adjustment disorder with depressed mood

**Presenting Problem**

Ann reported feeling increased symptoms of depression that began after a series of adjustments and transitions. She reported feeling symptoms of depression, anxiety, fatigue, avolition, tearfulness, hopelessness, anhedonia, feelings of worthlessness, isolation, difficulty concentrating, racing thoughts, irregular eating, and mood lability. Ann reported feeling impacted personally and interpersonally.

**Goal**

Ann will increase life satisfaction

**Objective**

Ann will manage symptoms of depression and anxiety.

Ann will successfully manage stressors and transitions.

Ann will increase parenting skills

Ann will successfully navigate interpersonal challenges with her husband.

**Treatment Frequency**

Every 1-2 weeks

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/83ee681281bb911c/diagnosis_treatment_plans/17438577) **- Priscilla**

10:59AM

**Diagnosis:**

F43.21 - Adjustment disorder with depressed mood

**Diagnosis:**

Z63.79 - Other stressful life events affecting family and household

**Presenting Problem**

Sophie reported experiencing symptoms of anxiety and depression that are impacted by stressors in her family. She reported experiencing fatigue, avolition, anhedonia, and difficulty concentrating. Sophie reported feeling impacted personally, interpersonally, and vocationally.

**Goal**

Sophie will create a healthy life balance

**Objective**

Sophie will find a healthy life balance in her work, home, and family commitments

Sophie will manage symptoms of anxiety and depression

Sophie will increase pleasureable activities.

**Treatment Frequency**

Every 1-2 weeks

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/07453791035933d9/diagnosis_treatment_plans/18082874) **- Priscilla**

1:59PM

**Diagnosis:**

F43.21 - Adjustment disorder with depressed mood

**Presenting Problem**

Kelly reported experiencing symptoms of distress after a series of personal, family, vocational, and global transitions and stressors. Kelly reported experiencing depressed mood, fatigue, avolition, tearfulness, apathy, feelings of worthlessness, anhedonia, isolation, difficulty concentrating, racing thoughts, disrupted sleep, anxiety, mood lability, and irregular appetite. Kelly reported feeling impacted personally, socially, family, and vocationally.

**Goal**

Kelly will manage symptoms of distress and increase her well-being

**Objective**

Kelly will manage symptoms of depression and anxiety.

Kelly will increase her awareness of patterns, responses, and choices.

Kelly will process her family of origin narrative and create adaptive skills for herself.

**Treatment Frequency**

Every 1-2 weeks

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/07453791035933d9/diagnosis_treatment_plans/18082874) **- Blake**

Diagnosis:

F41.1 - Generalized anxiety disorder

Presenting Problem

Jane Doe experiences GAD. Her symptoms have caused clinically significant distress in both work and relationships. She experiences symptoms of feeling worried and not being able to control it, feeling keyed up, difficulty concentrating, muscle tension, sleeping disturbances, and panic attacks.

Goal

Jane Doe will be able to manage her symptoms and learn coping skills in order to decrease her worry.

Objective

Use CBT techniques to decrease panic attacks as her report, find and utilize coping skills that are effective at reducing anxiety, and move towards being able to ride Disneyland Rides (confined spaces).

Treatment Frequency

Individual Therapy, utilizing CBT techniques, up to weekly for 180 days.

 [**Diagnosis & Treatment Plan**](https://secure.simplepractice.com/clients/07453791035933d9/diagnosis_treatment_plans/18082874) **- Blake**

Diagnosis:

F33.0 - Major depressive disorder, recurrent, mild

Diagnosis:

Z63.0 - Problems in relationship with spouse or partner

Presenting Problem

John Doe deals with Major depressive disorder as indicated by depressed mood, lack of motivation, anhedonia, isolating from others, and hopelessness. These symptoms seem to be made worse by conflict with his wife. They argue about how to best take care of each other as well as their two girls. John Doe has difficulty in handling conflict with his wife.

Goal

John Doe will utilize coping skills and move towards behavioral activation in order to decrease his depression symptoms. He will also learn new ways to communicate in order to help his relationship with his wife.

Objective

John Doe will learn and effectively utilize new coping skill to reduce depression symptoms. He will also learn and utilize new techniques for communicating with his wife. Success in the relationship will me measured by his reporting of less conflict between the two of them.

Treatment Frequency

Individual Therapy, utilizing CBT techniques, up to weekly.

**Diagnosis & Treatment Plan—Natalie**

**Diagnosis:**

F33.1 - Major depressive disorder, recurrent, moderate

**Presenting Problem**

Jane Doe has been diagnosed with major depressive disorder, recurrent, moderate and a rule out of PTSD. She reports a historical diagnosis of major depressive disorder that she manages with medication. She reports difficulty caring for herself at times, depressed mood, fear, anxiety, panic, isolation from others, difficulty sleeping, irritable mood, recurring thoughts, appetite disruptions, muscle tension, racing thoughts, avoidance of trauma reminders and easy startle reflex. She reports that these symptoms are disrupting her daily life in her family relationships and socially with being able to connect with others.

**Goal**

Jane Doe will reduce depression symptoms related to interpersonal relationships.

**Objective**

Jane Doe will reduce depression symptoms related to interpersonal relationships by utilizing effective calming and coping skills, recognizing and changing unwanted patterns in her life and increasing in interpersonal effectiveness skills. Clinician will utilize CBT to help Jane Doe meet her goals.

**Treatment Frequency**

weekly, as needed

## Diagnosis & Treatment Plan --Natalie

**Diagnosis:**

F33.1 - Major depressive disorder, recurrent, moderate

**Diagnosis:**

F43.10 - Post-Traumatic Stress Disorder, unspecified

**Presenting Problem**

John Doe has been diagnosed with major depressive disorder, recurrent, moderate and post-traumatic stress disorder. He reports symptoms of experiencing traumatic events, nightmares, difficulty eating, trouble concentrating, difficulty sleeping, low motivation, isolation. low energy, low self-esteem, depressed mood, tearfulness, anxiety, fear, hopelessness, panic, irritable mood, racing thoughts, lack of confidence, body image issues, and easy startle reflex. He reports significant impairment personally where it is difficult to be around male-identified people and causes an increase in struggles vocationally. He also reports current nail picking and skin picking behaviors.

**Goal**

John Doe’s goal is to increase in acceptance of his trauma, decrease feelings of anxiety and regain personal power.

**Objective**

John Doe will increase in acceptance and regain power personal power by reducing nail picking behaviors from 4x per week to 3x per week and skin picking behaviors from 7x per week to 6x per week by learning and implementing effective calming and coping behaviors and reprocessing her trauma. Clinician will utilize TF-CBT, DBT, and EMDR.

**Treatment Frequency**

weekly as needed