

## TRICHOTILLOMANIA (0722) (101617)

Category: **TEMPLATES TO RELEASE**

Scheduled appt type: \_\_\_\_\_

**CC** Hair Loss / Hair Pulling

Onset of symptoms: Sites of the body involved: Does the site involved vary over time (Y/N): Visible noted areas of hair loss (Y/N): Biting, chewing, or swallowing of the pulled hair (Y/N): Repeated attempts to decrease or stop the hair pulling (Y/N): Noted attempts to conceal areas of hair loss (makeup, wigs, scarves, etc.)? Does the hair pulling cause clinically significant distress, avoidance of, or impairment in social, occupational, or other areas of functioning? Other noted body-focused repetitive behaviors (skin picking, nail biting, lip biting or chewing)? Noted patient history of OCD or obsessive / compulsive tendencies? Patient history of depression or anxiety (Y/N): Family history of OCD (Y/N):

**freeform**

**ROS** \_\_\_\_\_

### Structured ROS

Pert: feeling scared or anxious	_____
Pert: fidgety or restless	_____
Pert: feeling sad	_____
Reports: hair loss	_____
Pert: Change in skin tone or texture	_____
Pert: rashes or dry skin	_____
Pert: muscle aches (myalgias)	_____
Pert: high stress levels	_____
Pert: diffuse abdominal pain	_____

### Structured exam

Pert: mood & affect	_____
Pert: inspection (includes subcutaneous tissue): no rash	_____
ABNL: Findings:	_____
Pert: abdomen: soft, nontender/nondistended, normal bowel sounds, no mass	_____
NL: auscultation of heart: regular rate & rhythm, no murmur	_____
NL: auscultation of lungs: clear & equal breath sounds without rales, rhonchi or wheeze	_____

NL: general appearance: alert, pleasant, not ill appearing, no distress

**Remaining template documentation elements**

<b>Counseling:</b>	When applicable, specific questions for patient: 1. Is hair pulling triggered by feelings of anxiety or boredom? 2. Is hair pulling preceded by an increasing sense of stress or tension? 3. Is there a feeling or relief or gratification after the hair is pulled out? 4. Does hair pulling occur in the presence of others, outside of immediate family? 5. History of any substance use (alcohol or drugs)?
<b>Coordination of Care:</b>	_____
<b>Diagnosis:</b>	Trichotillomania(F63.3)
<b>Assessment:</b>	Trichotillomania, consistent with DSM5 criteria. Differential diagnoses considered include but not limited to alopecia, autism
<b>Plan:</b>	Discussion with family about hair pulling, including most common onset occurring with or following the onset of puberty. Reviewed that site of hair pulling can vary over time, and that the course is often chronic with waxing and waning if untreated. Discussed potential of scarring and affect on long-term hair growth. Risks of hairballs noted, including concerns of abdominal pains, weight loss, GI blockage. Review of habit reversal training, cognitive behavioral therapy, and acceptance and commitment therapy as part of treatment plans. Discussion of treatment of co-morbid mental health concerns, if applicable. Reviewed that there are no specific medications for treatment, but that some

	medications have been used with varying degrees of effectiveness, to help control certain symptoms. Review local or online support groups for trichotillomania.
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<b>Patient Instructions:</b>	
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**Remaining workflow elements**

**Procedures**

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**Orders**

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