

SEPARATION ANXIETY DISORDER (0722) (101658)

Category: **TEMPLATES TO RELEASE**

Scheduled appt type: _____

CC Separation anxiety / fears

When was this first noted? Fear / anxiety / avoidance persisting at least 4 weeks (Y/N): Description of the distress: Other Developmental concerns? Concerns of family conflict (Y/N): History of any recent life stress or trauma (Y/N):

Developmentally inappropriate and excessive fear or anxiety concerning separation from parent / caregiver / other individual / environment Does this disturbance cause clinically significant distress or impairment (social / academic / occupational) (Y/N): How would you rate the level of distress from 1-5, where 5 equals an extremely high level of distress: History of at least 3 of the following (Y/N): 1. Recurrent excessive distress when anticipating or experiencing separation from home or from major attachment figures 2. Persistent and excessive worry about losing major attachment figures or about possible harm to them 3. Persistent and excessive worry about experiencing an untoward event (e.g getting lost, having an accident) that causes separation 4. Persistent reluctance or refusal to go out, away from home, to school, to work, or elsewhere because of fear of separation 5. Persistent and excessive fear of or reluctance about being alone or without major attachment figures at home or in other settings 6. Persistent reluctance or refusal to sleep away from home or to go to sleep without being near a major attachment figure 7. Repeated nightmares involving the theme of separation 8. Repeated complaints of physical symptoms (e.g., headaches, stomachaches) when separation from major attachment figures occurs or is anticipated History of agoraphobia (Y/N): History of generalized anxiety (Y/N): History of any other contributing condition (Y/N): Currently taking any medications (Y/N):

HPI

freeform

ROS _____

Structured ROS

Pert: Teacher concerns	<input type="checkbox"/>
Pert: feeling scared or anxious	<input type="checkbox"/>
Pert: crying more than usual	<input type="checkbox"/>
Pert: vomiting	<input type="checkbox"/>
Pert: nausea	<input type="checkbox"/>
Pert: not sleeping well	<input type="checkbox"/>
Pert: headache	<input type="checkbox"/>
Pert: decreased interest in social activities and hobbies that used to be pleasurable	<input type="checkbox"/>
Pert: feeling sad	<input type="checkbox"/>

Pert: palpitations	___
Pert: Concerns with behavior	___
Pert: trouble concentrating	___
Pert: feeling listless, lethargic	___
Pert: whining or crankiness	___
Pert: bedwetting	___
Pert: feeling light-headed or dizzy	___
Pert: diffuse abdominal pain	___

Structured exam

NL: mood & affect	___
NL: auscultation of heart: regular rate & rhythm, no murmur	___
NL: auscultation of lungs: clear & equal breath sounds without rales, rhonchi or wheeze	___
Pert: parent-child interactions	___
NL: activity level: responsive & interested in environment	___
NL: general appearance: alert, pleasant, not ill appearing, no distress	___
Pert: speech rate, volume, articulation and coherence	___
Pert: concentration	___
Pert: activity level	___

Remaining template documentation elements

Counseling:	___
Coordination of Care:	___
Diagnosis:	Separation anxiety disorder of childhood(F93.0)
Assessment:	Separation Anxiety Disorder, consistent with DSM5 criteria. Differential diagnoses considered, including but not limited to generalized anxiety disorder, agoraphobia, social anxiety disorder, PTSD, bereavement, prolonged grief disorder, and depressive disorder.
	Discussed separation anxiety as the most prevalent anxiety disorder in children younger than 12, and that prevalence typically decreases from childhood through adolescence and adulthood. Reviewed that

Plan:

some periods of increased separation anxiety part of normal early development. Discussed monitoring for development of or concerns for co-morbid conditions. Recommendation for Cognitive Behavioral Therapy (CBT), discussed goals of helping patient learn to face and manage fears about separation and uncertainty, and to also assist parents in providing emotional support. Encourage family-directed interventions to supplement individual therapy. Reviewed consideration of SSRI medication trial in older children and adolescents, including discussion of possible side effects and risks.

Patient Instructions:

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Remaining workflow elements

Procedures

Orders
