

Mental Health Medical Assessment Form

This **mental health medical assessment form** sample template provides a structured format to evaluate a patient's psychological well-being efficiently. It facilitates comprehensive data collection, including symptoms, medical history, and treatment progress. Using this template ensures consistent and thorough mental health assessments in clinical settings.

Patient Information

Full Name:

Date of Birth:

Gender:

 Select

Assessment Date:

Presenting Concerns

Describe main concerns/symptoms:

Mental Health History

Psychiatric/psychological history (diagnoses, hospitalizations, treatments):

Family mental health history:

Medical History

Medical conditions/medications/allergies:

Symptom Assessment

symptom	None	Mild	Moderate	Severe
Anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Irritability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sleep Disturbances	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Appetite Changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicidal Thoughts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Current Stressors / Psychosocial Factors

List any significant stressors, social, occupational, or family issues:

Substance Use

History of alcohol, drug, or substance use:

Risk Assessment

Assess for risk of harm to self or others, neglect, or other safety concerns:

Mental Status Examination (MSE)

Appearance/demeanor:

Speech/thought process:

Mood/affect:

Cognition/memory:

Insight/judgment:

Diagnosis (Provisional)

Primary and secondary diagnoses (DSM-5/ICD-10):

Treatment Plan / Recommendations

Interventions, medications, therapy, referrals, and follow-up:

Clinician Details

Clinician Name:

Signature:

Date: