WORDS COMMONLY USED BY CLINICIANS TO DOCUMENT INTERVENTIONS

- Asked
- Assisted client in
- Acknowledged
- Affirmed
- Encouraged
- Contracted
- Clarified – sought clarification
- Discussed
- Explained
- Established
- Evaluated
- Developed
- Discussed
- Explained
- Inquired about
- Directed
- Redirected
- Refocused
- Examined with the client the benefits/consequences
- Explored
- Elicited
- Emphasized
- Pointed out the consequences
- Listened closely to the client for
- Confronted client about
- Negotiated with the client
- Helped client to identify
- Guided
- Interpreted
- Instructed
- Focused on
- Paraphrased
- Inquired about
- Reframed
- Lead client in practicing
- Performed
- Reflected back
- Repeated back
- Reinforced
- Praised
- Responded to
- Shared
- Reviewed with
- Validated
- Supported client’s efforts to
- Verbally addressed client’s concern
- Gave homework assignment
- Trained the client in one of several relaxation techniques
- Informed
- Confronted
- Recommended
### TASK PERFORMANCE

**Following Directions:**
- follows written directions
- needs repeated directions
- follows (1-2-3) step directions

**Use of Time:**
- works intermittently
- organized
- realistic planning
- utilizes time well
- works slowly
- plans ahead
- irregular attendance
- hurried
- productive
- skips steps

**Choice of Activity:**
- hesitant
- apathetic
- seeks challenging activity
- ambivalent
- chooses familiar activity
- resistant
- indifferent
- creative, repetitive

**Approach to Activity:**
- persistent
- interested
- tolerates delays
- impulsive
- seeks challenging activity
- persevering
- follows through
- reckless
- seeks quick results
- tolerant of frustration
- thorough
- methodical
- careful
- careless
- quick gratification
- neat
- cautious
- use of judgement
- disregards mistakes

**Independence/Dependence:**
- seeks direction
- accepts direction
- disregards direction
- seeks reassurance
- self-sufficient
- competent
- independent
- teach others

### SOCIAL

- expressive
- articulate
- self-disclosing
- considerate
- tolerant
- isolating
- self-focused
- exclusive
- timid
- dependent
- watchful
- intrusive
- flippant

- congrial
- gracious
- assertive
- sensitive
- supportive
- guarded
- detached
- deferring
- ingratiating
- aggressive
- sarcastic
- competitive

- engaging
- talkative
- spontaneous
- sympathetic
- concerned
- solitary
- suspicious
- passive
- condescending
- distrustful
- threatening
- critical
- submissive

- agreeable
- warm
- outspoken
- care-taking
- indifferent
- superficial
- withdrawn
- boastful
- submissive
- docile
- provocative

**Behavior:**
- eye contact (direct, occasional, elusive)
- group skills: parallel, competitive, cooperative
- verbal/nonverbal
- speech patterns (rapid, forced, spontaneous, latent)
- quality of grooming
- response of peers to patient

### Social Behaviors:
- eye contact (direct, occasional, elusive)
- group skills: parallel, competitive, cooperative
- verbal/nonverbal
- speech patterns (rapid, forced, spontaneous, latent)
- quality of grooming
- response of peers to patient
CHANGING LABELS TO OBSERVABLE BEHAVIORS

Below is a listing of possible observable behaviors which may be associated with a specific label.

**DISRUPTIVE**
- interrupts
- asks inappropriate questions
- tardy
- shouts out
- plays with inappropriate objects
- talks out loud or to neighbors
- throws objects
- leaves seat or room without permission

**DOESN'T PAY ATTENTION**
- stares into space
- daydreams
- does not follow directions

**POOR ACADEMIC PERFORMANCE**
- gives up or doesn't complete work
- finishes late
- does other activities when he should be working
- hands in sloppy work
- will work only when you pressure him to
- hands in incorrect work

**HYPERACTIVE**
- fidgets or squirms in his seat
- excessively out of seat
- runs in the classroom
- short attention span

**SHY AND WITHDRAWN**
- does not interact with peers
- does not interact with adults
- plays alone
- rarely speaks

**SNEAKY AND DISHONEST**
- cheats
- lies
- blames his actions to others
- steals
- talks under his breath

**TOO EMOTIONAL**
- expresses excessive fear and worry
- laughs or cries inappropriately
- tantrums
- afraid of all new activities
- excessive angry comments or actions

**DISRESPECTFUL**
- argues with decisions
- refuses to follow directions

**TOO DEPENDENT**
- seeks excessive praise or encouragement
- curries favor
- seeks excessive help
- too compliant
- afraid to work on his own
- seeks excessive attention and/or approval

**HOSTILE TROUBLEMAKER**
- provokes fights
- engages in fights
- calls peers names
- teases others
- excessive hostile comments
- damages or destroys the property of others
LENGUAJE CLÍNICO EN ESPAÑOL

Josefina L. Sierra, LCSW

Octubre 2, 2010

- Projectar
  - Projecting
  - CANALIZAR
  - CHANELING

- Evaluación
  - Assessment
  - PATRONES
  - PATTERNS

- Proceso
  - Process
  - ASERTIVO
  - ASSERTIVE

- Desahogarse
  - Ventilating
  - CONDUCTA
  - BEHAVIOR

- Lidiar
  - COPE
  - APOYO
  - SUPPORT SYSTEM

- Herramientas
  - Tools
  - ABRUMADO
  - OVERWHELMED

- Retroceder
  - Regress
  - ASESORIAMIENTO
  - COUNSELING

- Triangulación
  - Triangulation
  - ESTRATEGIAS
  - STRATEGIES

- Alianza
  - Alliance
  - SALUD EMOCIONAL
  - MENTAL HEALTH

- Desplazando
  - Displacing
  - ESTADO DE ANIMÓ
  - MOOD

- Intimidando
  - Bullying
  - COMPORTAMIENTO
  - BEHAVIOR

- Parcial
  - Biased
  - LIMITES
  - BOUNDARIES

- Etiqueta
  - Label
  - PREOCUPACIÓN
  - CONCERN

- Vínculo / Parent
  - Attachment
  - METAS
  - GOALS

- Negación
  - Denial
  - DECISIONES
  - CHOICES

- Procedimiento
  - Procedure
  - APTITUDES
  - SKILLS

- Dar Seguimiento
  - Follow Up
  - AWARENESS
  - CONCIENCIA

- Ejemplo
  - Role Model
  - CALIDADES
  - QUALITIES

- Inestable
  - Unstable
  - DESARROLLO
  - DEVELOPMENT

- Desesperado
  - Desperate
  - RETOS
  - CHALLENGES

- Abiuridades
  - Strengths

- Explorado
  - Exploring
ENKI HEALTH & RESEARCH SYSTEMS, INC.
CLIENT PROGRESS NOTES/MENTAL HEALTH SERVICES
Confidential Patient Information – See California W & I Code Section 5328

DATE: __________________ ENKI ID# __________________ LACo ID# __________________ PROVIDER # __________________

STAFF NAME & TITLE:___________________________________________

CLIENT ID# ___________ CLIENT NAME: __________________________________________ SERVICE LOCATION ___________ □ T

PROC CODE: ___________ TIME: FF: __ OT: __ TT: __ # CLIENTS PRESENT ___________

ADDITIONAL STAFF: STAFF # ___________ TT: ___________ STAFF # 3 ___________ TT: ___________

I acknowledge that this document generates a bill to the client’s funding source and all information is accurate, complete, and truthful. I attest that these services meet the test of medical necessity, are consistent with the treatment plan, adequately documented, and time billed is reasonable for the service provided.

GOAL(S):
Indicate treatment objective verbatim from the CCCP. The objective identified must be related to the service rendered and documented.

INTERVENTION:

1. PRESENT FOR THE SESSION: Indicate who was present for the session: staff, client, collateral. Indicate staff by first, last name and discipline the first time mentioned. Consequent references can be shortened.

2. TRAVEL: Indicate any travel that was required to provide the service. Make a statement such as: "Therapist traveled from Boyle Heights clinic to Hollenbeck Elementary to attend client's IEP meeting."

3. PURPOSE OF SESSION/SERVICE: Indicate the purpose and context of the session.

Examples:
"MHW met with client for scheduled appt. to complete Annual paperwork."
"Therapist met with client for unscheduled appt. at client's request due to recent death in his family."
"MHW met with client in order to provide referrals to primary care physician in the client's area."

4. CLIENT'S PRESENTATION & AFFECT: Describe the client presentation and affect. PHYSICAL APPEARANCE – hygiene, clothing, make-up, tattoos, piercings, jewelry, bruises, etc.; BODY LANGUAGE / NON-VERBALS – relaxed, tense, closed, open, facial expressions, gestures; EYE CONTACT – good, inconsistent, poor, avoidant; ENERGY LEVEL – good, high, overly active/hyper, agitated, restless, fidgety; AFFECT – stable, jovial/happy/cheerful, euphoric/manic, depressed/sad/flat/blunted, fearful/crying, serious/solemn/intense, anxious/worried/nervous, labile frequently changing/uneasy, inappropriate to context or discussion, mood incongruent, etc.; THOUGHT CONTENT/PROCESS – logical/clear/coherent/appropriate, illogical, egocentric/narcissistic, negative/pessimistic, idealistic, paranoid, morbid, blaming, hallucinations (visual, auditory, tactile, olfactory), suicidal, homicidal, aggressive/angry, obsessive/compulsive, delusional, etc.

5. STAFF INTERVENTIONS: Describe the service you provided by stating your interventions. Interventions have to be more than just active listing, provided empathy, provided a “safe environment,” praised client. Describe what you did clinically. Interventions used should tie back to what is stated on the CCCP and make sense given the client diagnosis, treatment objectives, and issues described in the session/contact.

6. CLIENT RESPONSE: Describe the client’s response to your interventions during the session or phone call.

RESPONSE:
This is not a repeat of how the client responded in this specific service but a summary and reflection on how the client has been doing over the last few or several sessions. Is the client making progress toward the treatment objective indicated? Has the client been escalating, regressing, worsening, improving? Does the client show a better response to certain kinds of interventions vs. others? Has the client had noteworthy stressors (i.e. trauma, death, child abuse report, change in placement, moving, loss, health problems, etc.)

PLAN:
Given the services delivered.... What is the next step? This section is meant for more than mentioning the next scheduled appointment. What will the client and/or parent do before the next session? Did you give the client homework? Is there something from this session that needs follow-up by the client, parent/caregiver or staff?

STAFF SIGNATURE: __________________
CO-SIGNATURE (IF APP.) __________________
How to Use Intervention Verbs

Instead of writing

MHW called client.
MHW talked with client.
MHW told client...
MHW went over client's tx goals.
MHW gave client the phone number for...
MHW told client to talk to her therapist.

MHW gave client her appt. information and told client to write her appts on her calendar.

MHW told client he did a good job.
MHW completed tx-goals with client.
MHW told client how important it is that she attend all of her M.D. appts.

Write

MHW outreached client via telephone.
MHW listened (clarified, encouraged).
MHW directed (explained, discussed)
MHW reviewed (addressed, followed up)
MHW linked client to..
MHW provided redirection by encouraging client to talk to her therapist.
MHW linked client to individual therapy by providing client with her appt. information and encouraged client to keep track of her appts by writing them down on her calendar.
MHW praised client for his effort.
MHW assisted client in developing tx goals.
MHW emphasized the importance of regular attendance to all appts. with client.
Intervention Verbs for Mental Health Workers

acknowledged
asked
assisted
brainstormed
clarified/sought clarification
developed
directed
discussed
emphasized
encouraged
explained
focused on
followed up
helped
informed
inquired about
instructed
linked
listened
monitored
outreached
paraphrased
practiced
provided feedback
provided psycho-education
provided support
recommended
redirected
referred
reminded
responded
reviewed
role played
## Commonly Used Abbreviations & Standard Medical Symbols

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
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<tbody>
<tr>
<td>+</td>
<td>positive</td>
</tr>
<tr>
<td>Sx</td>
<td>symptoms</td>
</tr>
<tr>
<td>a.c.</td>
<td>before meal</td>
</tr>
<tr>
<td>ad lib</td>
<td>as desired</td>
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<tr>
<td>a.m.</td>
<td>morning</td>
</tr>
<tr>
<td>b.i.d.</td>
<td>twice daily</td>
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<tr>
<td>hr</td>
<td>hour</td>
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<tr>
<td>h.s.</td>
<td>at bed time</td>
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<tr>
<td>M.</td>
<td>midnight</td>
</tr>
<tr>
<td>N.</td>
<td>noon</td>
</tr>
<tr>
<td>p.c.</td>
<td>after meals</td>
</tr>
<tr>
<td>p.m.</td>
<td>afternoon</td>
</tr>
<tr>
<td>p.r.n.</td>
<td>as often as necessary</td>
</tr>
<tr>
<td>q.d.</td>
<td>every day</td>
</tr>
<tr>
<td>q.h.</td>
<td>every hour</td>
</tr>
<tr>
<td>q.i.d.</td>
<td>four times a day</td>
</tr>
<tr>
<td>q. noc</td>
<td>every night</td>
</tr>
<tr>
<td>q. o.d.</td>
<td>every other day</td>
</tr>
<tr>
<td>q. 4h</td>
<td>every four hours</td>
</tr>
<tr>
<td>q. 6h</td>
<td>every six hours</td>
</tr>
<tr>
<td>STAT</td>
<td>immediately</td>
</tr>
<tr>
<td>t.i.d.</td>
<td>three times a day</td>
</tr>
<tr>
<td>q</td>
<td>every</td>
</tr>
<tr>
<td>amt</td>
<td>amount</td>
</tr>
<tr>
<td>ax</td>
<td>axillary</td>
</tr>
<tr>
<td>NOC</td>
<td>night</td>
</tr>
<tr>
<td>BIB</td>
<td>brought in by</td>
</tr>
<tr>
<td>F/U</td>
<td>follow up</td>
</tr>
<tr>
<td>S/I</td>
<td>suicide ideations</td>
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<tr>
<td>H/I</td>
<td>homicidal ideation</td>
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<tr>
<td>IV</td>
<td>Intravenously</td>
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<tr>
<td>HX</td>
<td>History</td>
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<tr>
<td>b.p.</td>
<td>blood pressure</td>
</tr>
<tr>
<td>B.R.P.</td>
<td>bathroom privilege</td>
</tr>
<tr>
<td>c</td>
<td>with</td>
</tr>
<tr>
<td>L.M.</td>
<td>Intramuscular</td>
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<tr>
<td>Sub Q</td>
<td>Subcutaneously</td>
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<tr>
<td>Tx</td>
<td>Treatment</td>
</tr>
<tr>
<td>á</td>
<td>before</td>
</tr>
<tr>
<td>Sz</td>
<td>Schizophrenia</td>
</tr>
<tr>
<td>BAD</td>
<td>Bipolar Affective Disorder</td>
</tr>
<tr>
<td>BPD</td>
<td>Borderline Personality Disorder</td>
</tr>
<tr>
<td>S/R</td>
<td>Seclusion and restraints</td>
</tr>
<tr>
<td>DTS</td>
<td>Danger to self</td>
</tr>
<tr>
<td>DTO</td>
<td>Danger to others</td>
</tr>
<tr>
<td>CHF</td>
<td>Congestive heart failure</td>
</tr>
<tr>
<td>COPD</td>
<td>Chronic obstructive pulmonary disorder</td>
</tr>
<tr>
<td>H&amp;P</td>
<td>History and physical</td>
</tr>
<tr>
<td>SBP</td>
<td>Systolic blood pressure</td>
</tr>
<tr>
<td>DPB</td>
<td>Diastolic blood pressure</td>
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<tr>
<td>CPZ</td>
<td>Thorazine</td>
</tr>
<tr>
<td>AH</td>
<td>Auditory Hallucinations</td>
</tr>
<tr>
<td>LOA</td>
<td>Loosening of associations</td>
</tr>
<tr>
<td>AWOL</td>
<td>Absent without leave</td>
</tr>
<tr>
<td>TCON</td>
<td>Temporary conservatorship</td>
</tr>
<tr>
<td>ROM</td>
<td>Range of motion</td>
</tr>
<tr>
<td>CBC</td>
<td>Complete blood count</td>
</tr>
<tr>
<td>RBC</td>
<td>Red blood count</td>
</tr>
<tr>
<td>WBC</td>
<td>White blood count</td>
</tr>
<tr>
<td>ADA</td>
<td>American Diabetes Association</td>
</tr>
<tr>
<td>SOB</td>
<td>Shortness of breathe</td>
</tr>
<tr>
<td>Dx</td>
<td>Diagnosis</td>
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<tr>
<td>ECG/EKG</td>
<td>Electrocardiogram</td>
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<tr>
<td>EEG</td>
<td>Electroencephalogram</td>
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<tr>
<td>Fx</td>
<td>Fracture</td>
</tr>
<tr>
<td>GI</td>
<td>Gastrointestinal</td>
</tr>
<tr>
<td>mg</td>
<td>Milligram</td>
</tr>
<tr>
<td>STD</td>
<td>Sexually transmitted disease</td>
</tr>
<tr>
<td>TD</td>
<td>Tardive dyskinesia</td>
</tr>
<tr>
<td>S/E</td>
<td>Side effect</td>
</tr>
<tr>
<td>VDRL</td>
<td>Test for syphilis</td>
</tr>
<tr>
<td>Li^2CO³</td>
<td>Lithium carbonate</td>
</tr>
<tr>
<td>Dec</td>
<td>Decanoate (Long-acting form of anti-psychotic which is given by injection)</td>
</tr>
<tr>
<td>cc</td>
<td>cubic centimeter</td>
</tr>
<tr>
<td>cal</td>
<td>calorie</td>
</tr>
<tr>
<td>WNL</td>
<td>Within normal limits</td>
</tr>
<tr>
<td>PMA</td>
<td>Psychomotor agitation</td>
</tr>
<tr>
<td>PMR</td>
<td>Psychomotor retardation</td>
</tr>
<tr>
<td>Ox³</td>
<td>Oriented in three spheres (person, place, time)</td>
</tr>
<tr>
<td>EMA</td>
<td>Early morning</td>
</tr>
<tr>
<td>STM</td>
<td>Short-term memory</td>
</tr>
</tbody>
</table>
LTM - Long-term memory
TBI - Traumatic brain injury
MR - Mentally retarded
DD - Developmentally disabled
TIA - Transient ischemic attack (brief period during which a portion of the brain was oxygen deprived)
c/o - complains of
d/c - discontinue
I&O - intake and output
L - left
N.P.O. - nothing by mouth
p - after
P.O. - by mouth
Rec - rectal
Rx - prescriptions

R or rt. - right
s - without
Sx - symptoms
T.P.R. - temperature, pulse, respiration
Vital - temperature, pulse,
Signs - respiration, and blood pressure
V.O. - verbal order
T.O. - telephone order
I - one
II - two
III - three
IV - four
IM - intramuscularly