

SOAP Notes for Therapy

Therapy Session Record
Confidential client record

Client Name	Madison Carter	Date of Birth	02/09/1994
Session Date	10/21/2026	Time / Duration	10:00 AM, 53 min
Client ID	CL-30517	Session No.	4
Therapist	Jordan Lee, LPC	Format	Telehealth
Diagnosis (ICD-10)	F41.1	CPT Code	90837

S Subjective

Client's report, presenting concerns, mood, quotes, changes since last session

Madison reports a "better couple of weeks." Work worry has decreased since she started time-blocking her mornings. Still has racing thoughts at night 3–4 nights a week; sleep onset around 40 minutes.

Completed thought records on 5 of 7 days. One panic episode before Monday's team meeting: "My heart was pounding and I was sure everyone could tell." Average anxiety 5/10 this week (7/10 at intake).

O Objective

Presentation, behavior, affect, mental status, outcome measures (e.g. PHQ-9, GAD-7)

Telehealth via secure video; client located at home in a private room, identity and location confirmed. Casually dressed, good eye contact and rapport. Speech normal in rate and volume. Mood "okay," affect mildly anxious but reactive. Thought process logical and goal-directed; no perceptual disturbances.

PHQ-9: 9 (intake 14). GAD-7: 11 (intake 16). Homework thought records reviewed on screen.

A Assessment

Clinical impression, progress toward goals, medical necessity, barriers

Generalized anxiety disorder (F41.1) with occasional panic symptoms. Madison is progressing toward treatment goals: GAD-7 has moved from the severe to the moderate range and PHQ-9 is now mild. Continued weekly CBT remains medically necessary to address persistent sleep-onset difficulty and anticipatory anxiety, which continue to affect work functioning.

P Plan

Interventions used, homework, goals, referrals, next session

In session: reviewed thought records; set up a behavioral experiment for Monday's meeting; taught paced breathing for panic symptoms.

Homework: one behavioral experiment; continue thought records; 20-minute wind-down routine and stimulus control for sleep.

Next session in 1 week. Repeat PHQ-9 and GAD-7 monthly. Update treatment plan at 90-day review.

Risk Assessment

Self-harm, suicide, harm to others, safeguarding

☐ None identified ☒ Low ☐ Moderate ☐ High

Notes: Denies SI/HI, plan or intent. Protective factors: partner, job, faith community.

Signature

J. Lee

License No.

LPC-012345

Date Signed

10/21/2026