Biopsychosocial assessment template

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BIOPSYCHOSOCIAL ASSESSMENT

Client

Date of assessment

Clinician

Referral source

REASON FOR REFERRAL

Why the client is here, in their own words:

Who referred them and what they asked for:

PRESENTING PROBLEM

Main concerns, when they started, how often, how severe:

Effect on work, school, relationships and daily life:

BIOLOGICAL

Physical health conditions and recent changes:

Current medications (as reported) and prescriber:

Sleep, appetite, energy, pain:

Alcohol, drugs, tobacco and caffeine (type, amount, how often, last use):

Family history of physical or mental health conditions:

PSYCHOLOGICAL

Past mental health history, treatment and hospital stays:

Current mood, thoughts and coping:

Trauma history (as much as the client chooses to share):

Mental status at assessment (brief):

Thoughts of self-harm, suicide or harming others (asked, and the answer):

SOCIAL

Living situation and who is at home:

Relationships, family and support network:

Education, work and finances:

Legal involvement:

Culture, identity and language needs:

SPIRITUAL (IF USED IN YOUR SETTING)

Beliefs, faith community or sources of meaning the client finds important:

STRENGTHS

What is going well, skills, interests, people who help:

CLINICAL SUMMARY

How the biological, psychological and social factors fit together:

Risk summary:

RECOMMENDATIONS

Services, referrals and next steps:

Initial goals agreed with the client:

Signature and credentials:

Educational template, not medical or legal advice. Follow your employer and regulator rules.