

# Progress Notes



**Client:** \_\_\_\_\_ **Session #:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Key cognitions:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Key behaviors:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Emotional reactions:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Major events:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mental status:** \_\_\_\_\_ **Additional symptoms:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mood/affect?** \_\_\_\_\_

|                                  |            |           |                                       |
|----------------------------------|------------|-----------|---------------------------------------|
| <b>Hallucinations/delusions?</b> | <b>Yes</b> | <b>No</b> | <b>Other:</b> _____<br>_____<br>_____ |
| <b>Suicidal ideation?</b>        | <b>Yes</b> | <b>No</b> |                                       |
| <b>Suicidal intent?</b>          | <b>Yes</b> | <b>No</b> |                                       |

**CBT methods used:** \_\_\_\_\_  
\_\_\_\_\_

**Homework assigned:** \_\_\_\_\_  
\_\_\_\_\_

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

**Plan for next session:** \_\_\_\_\_  
\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

