

Anxiety Treatment Guidelines

General Information	
Document Creation Date:	Last Revision Date:
Created by (Name/Position):	
Intended for (Healthcare Setting):	
Diagnostic Criteria and Methods	
1. Clinical Interview	Guidelines for conducting an interview to assess anxiety symptoms.
2. DSM-5 Criteria	Checklist for diagnosing Generalized Anxiety Disorder (GAD), Panic Disorder, Social Anxiety Disorder, etc.
3. Diagnostic Codes	ICD-10 Codes: F41.1 (Generalized Anxiety Disorder), F40.10 (Social Anxiety Disorder), etc.
	CPT Codes: For initial evaluation 90791, for psychotherapy sessions 90837 and 90834.
Treatment Recommendations	
1. Pharmacological Treatments	First-Line Treatments: SSRIs (e.g., Sertraline, Escitalopram), SNRIs (e.g., Venlafaxine, Duloxetine).
	Alternative Options: Benzodiazepines (for short-term use), Buspirone, etc.
	Monitoring and Side Effects: Guidelines for follow-up appointments and monitoring adverse effects.
2. Psychotherapy Interventions	Cognitive Behavioral Therapy (CBT): Recommended protocol and session frequency.
	Exposure Therapy: For specific phobias and social anxiety disorder.
	Other Therapeutic Approaches: Acceptance and Commitment Therapy (ACT), Mindfulness-Based Stress Reduction (MBSR), etc.

Testing and Assessment Tools	
1. Recommended Tools	GAD-7 for generalized anxiety, Panic Disorder Severity Scale (PDSS), Social Phobia Inventory (SPIN), etc.
2. Purpose and Interpretation	Guidelines on how to administer these tools and interpret results.
Coding for Billing	
1. ICD Codes	For anxiety disorders and related conditions.
2. CPT Codes	For diagnostic interviews, therapy sessions, and any additional tests.
Personalized Care Notes	
1. Adjustments in Treatment Plans	Section for documenting changes based on patient response.
2. Specific Observations	Any notable patient behaviors or statements during sessions.
3. Patient Education and Engagement	Strategies for involving patients in their treatment plan and educating them about anxiety management.
Implementation and Follow-Up	
1. Treatment Implementation	Steps for initiating treatment based on the selected approaches.
2. Monitoring Progress	Schedule for follow-up assessments and criteria for evaluating treatment effectiveness.
3. Adjusting Care Plans	Guidelines for modifying treatment based on patient progress and feedback.
Approval and Review	
Approved by (Name/Position):	
Date:	
Review Schedule (Next scheduled review date or criteria for triggering an earlier review):	