Panic Attack Treatment Plan

Patient information	
Name:	Date of birth:
Gender:	
Contact information:	
Medical history:	
Treatment overview	
Date:	
Summary:	
Assessment and diagnosis	
Psychiatric evaluation:	
Frequency of panic attacks:	
Intensity of symptoms:	
Nature of panic attacks:	
reactive of partie attacks.	
Functional impairments:	
r anotional impairments.	

Treatment modalities
Psychotherapy:
CBT components:
Psychoeducation
Cognitive restructuring
Exposure therapy
Breathing retraining
Pharmacotherapy:
SSRIs
SNRIs
Benzodiazepines
Treatment planning
Goals:
Treatments to follow:
Criteria for successful treatment plan:
Reduced frequency
Reduced intensity
Improved functioning
Enhanced quality of life

Monitoring and follow-up	
Progress monitoring tools:	
PDSS CGI scale	
Check-in frequency:	
Treatment adjustments:	
Additional notes	
Healthcare professional information	
Name:	License ID number:
Signature:	Date of assessment: