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Licensed Psychologist
Adults and Adolescents
Mood, Anxiety, and
Addictions Disorders

Name: _____

Date: _____

Relevant Social History: Check "yes" if currently present or if in the past still relevant in understanding the client's current situation.

	Yes	No		Yes	No
Family history of mental illness	___	___	History of placements outside of home	___	___
Family history of substance abuse	___	___	Cultural issues contributing to stress	___	___
Physical/Sexual abuse/neglect	___	___	Significant legal problems	___	___
Domestic violence	___	___	Significant medical problems	___	___
Protective services involvement	___	___	Significant financial problems	___	___

Please elaborate on any items endorsed above or other relevant information:

Family interactional patterns: Include disciplinary methods, parent/caretaker strengths and weaknesses, quality of communication, effects of the problem on the family and vice versa.

Interpersonal relationships: Describe the quality of child's relationships with peers and adults outside the home:

Interests and activities: Include play and recreational activities (frequency, amount of time spent, and appropriateness to developmental level), club involvements, and any religious activity.

Educational history and functioning: Include current past school placements and assessments of cognitive functioning:
