

Alcohol abuse

Yes ☒ No

Drug abuse

Y/N

Previous mental health contact

Y/N

Previous mental health diagnosis

Y/N

Previous deliberate self harm

Y/N

Ongoing treatment

Y/N

Psychotropic medication

Y/N

P 1st CPH

MENTAL STATE ASSESSMENTCan I get an adequate history?
If no, specify reason

Y/N

Orientation Time:
Place:
Person:

} Yes

Glasgow Coma Score:

15 / 15

Evidence of self neglect

Y/N

Behaviour:

Bizarre Aggressive Psychomotor retarded

Mood

Hallucinations

Y/N

Delusions

Y/N

Disordered thinking

Y/N

Ongoing suicidal ideation:

Y/N

PLEASE USE BOXES FOR SUPPLEMENTARY INFORMATION

Date 13/8/12

Time 15.35

Signature

N. M. M.

NH: 434-086-1671

MRN 26181654

CC. ROELL, Simon, P
Mire

26-JAN-1981

23 Byron Terrace
Hartford Road
Edmonton
London
N9 7DG