

## Psychiatry note on Intake

PATIENT WAS NOT SEEN and information was gathered by the care coordinator, Danielle Boone, RN. See care coordinator notes for additional details. Care coordinator documentation associated with these recommendations can be accessed by clicking the hyperlink below.

### **ASSESSMENT:**

Florence Nightingale is a 73 y.o. female, with a history of Depression and Anxiety who is referred to IBH Care Coordination for help in management of mood symptoms.

Primary symptoms of concern: Increased irritability

### **Current medications - amitriptyline PRN at 10 mg (worries about falls)**

Past medication trials: denies - records show Ambien in the past

### **RECOMMENDATIONS:**

1. She has recently had her thyroid medication increased (this month) and she has been describing sleep issues as primary with fears about falling from amitriptyline (given per records for bowel issues). No other trials. Will need a follow up TSH in the fall.
2. With memory concerns and worries about a fall, amitriptyline is not ideal. Could test out a low dose of mirtazapine to see if she sleeps better without any dizziness but she should still get up carefully.
3. She may be having some challenges related to medical issues and stress. Therapy could look at CBT for insomnia and resilience support.

PATIENT WAS NOT SEEN and information was gathered by the care coordinator. Recommendations are based on chart review and discussion with the care coordination team. The intention is for these recommendations to be seen as options/suggestions by the care coordination team. The application of these or other clinical recommendations are subject to PCP's discretion and clinical discussions with the patient.