

Dr Alan Grigg
Ipswich Medical Centre
5/117 Brisbane St Ipswich Qld 4305
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Provider: 2616912Y
ABN: 37 088 149 893
EMAIL ADDRESS - ipswich@ipn.com.au

01/05/2021

Mary Campbell
23 Albert St
Rosewood. 4340
Phone: 54679268
Fax:

RE: Ms Bridget Norris
26/03/1991
7 Walloon Road
Rosewood. 4340

Dear Mary,

Thank you for seeing Bridget Norris for an opinion and management of a chronic anxiety problem caused by a variety of reasons namely her mother her work her pet dog and relationship stressors and financial issues.

Her current medications are:

Diazepam 2mg Tablet	1-2 Twice a day As directed
Endep 25 25mg Tablet (Amitriptyline Hydrochloride)	1 nocte

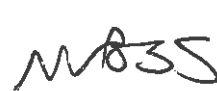
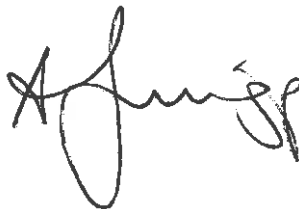
Lovan 20mg Capsule (Fluoxetine Hydrochloride)	2 mane
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Allergies:
Nil known.

Past Medical History:
Not recorded.

Yours faithfully,

Dr Alan Grigg



**GP MENTAL HEALTH CARE PLAN (MBS ITEM NUMBER 2715)
PATIENT ASSESSMENT**

Patient's Name: Ms Bridget Norris	Date of Birth: 26/03/1991
Address: 7 Walloon Road osewood 4340	Phone: 5467 9002 0408797543
Medicare Number: 426186291	Other care plan : ☐ Yes Eg GPMP / TCA ☐ No
GP Name: Dr Alan Grigg GP Provider Number: 2616912Y	Practice: Ipswich Medical Centre
Ipswich Medical Centre 5/117 Brisbane Street IPSWICH QLD 4305 ph- 3812 2099 fx- 3812 3928	Date: 01/05/2021

PRESENTING ISSUE(S): What are the patient's current mental health issues.

panic anxiety disorder

PATIENT HISTORY: Record relevant biological psychological and social history including any family history of mental disorders and / relevant substance abuse or physical health problems.

EDICATIONS: (attach information if required)

alprazolam 2mg Tablet	1-2 Twice a day As directed
amitriptyline 25mg Tablet (Amitriptyline Hydrochloride)	1 nocte

fluoxetine 20mg Capsule (Fluoxetine Hydrochloride)	2 mane
salbutamol CFC-Free 100mcg/dose Inhaler (Salbutamol sulfate)	2 4th hr prn

ALLERGIES:
None known.

ANY OTHER RELEVANT INFORMATION:

RESULTS OF MENTAL STATE EXAMINATION: Record after patient has been examined.

RISKS AND CO-MORBIDITIES: Note any associated risks and co-morbidities including suicidal tendencies and risks to others.

OUTCOME TOOL USED: K 10	RESULTS: 25
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DIAGNOSIS:anxiety and depression

GP MENTAL HEALTH CARE PLAN (MBS ITEM NUMBER 2710)
PATIENT PLAN

PATIENT NEEDS / MAIN ISSUES:

GOALS: Record the mental health goals agreed to by the patient and GP and any actions the patient will need to take

TREATMENTS: Treatments, actions and support services to achieve patient goals

REFERRALS: Note: Referrals to be provided by GP, as required, in up to two groups of six sessions. The need for the second group sessions to be reviewed after the initial six sessions

APPROPRIATE PSYCHO-EDUCATION PROVIDED:

☐ x Yes
☐ No

PLAN ADDED TO THE PATIENTS RECORD:

☐ x Yes
☐ No

COPY (OR PARTS) OF THE PLAN OFFERED TO OTHER PROVIDERS:

☐ x Yes
☐ No
☐ Not Rec'd

COMPLETING THE PLAN:

On completion of the plan, the GP is to record that s/he has discussed with the patient: the assessment;

- all aspects of the plan and the agreed date for review; and
- offered a copy of the plan to the patient and/or their carer (if agreed by patient)

DATE PLAN COMPLETED: 01/05/21

REVIEW DATE: 01/08/21

(initial review 4 weeks to 6 months after completion of plan)

REVIEW COMMENTS: (Progress on actions and tasks) Note: If required, a separate form may be used for the Review.

OUTCOME TOOL RESULTS ON REVIEW: