INTERVENTION STRATEGY NOTES

Patient Name: _____ Date: _____

Session length: _____

Therapist: _____ Session number: _____

Session Goal: _____

_____

_____

_____

_____

Effectiveness of previous session: _____

_____

_____

_____

_____

Effectiveness of homework: _____

_____

_____

_____

_____

Client's involvement and contributions in session: _____

_____

_____

_____

_____

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Client's status: _____

_____

_____

_____

_____

New homework assigned: _____

_____

_____

_____

_____

Future intervention/strategy: _____

_____

_____

_____

_____

Notes/comments: _____

_____

_____

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_____

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