DAP Progress Note Template

DAP is an acronym for **D**ata, **A**ssessment, and **P**lan. This simple progress note template will help you organize your notes. Remember DAP Progress Notes are part of official client records and can be shared with others.

D – Data. When writing in this section, take note of what you observe during the session, including behaviors – especially those that might affect the way you proceed with treatment.

A – Assessment. After you have recorded relevant behaviors, use this section to understand what those behaviors might mean. Essentially, you have collected your data and now you need to analyze it. What do you think your client's behaviors mean?

P – Plan. You have gathered data through observation, you have assessed the data, and now you will use what you have learned to plan your client's treatment.

Consider what information you need about your client and the session to be able to create a plan. Also, consider that if someone else were writing these notes, what information would you find helpful?

Sample

Name: *John Miller* ***Date of Birth:*** *05/20/1961* ***Date:*** *01/04/21* ***Time:*** *3:00 PM*

Data: *Client appeared somewhat angry and agitated. He was fidgeting and picking at a loose thread on his sweater. He reported he has been drinking alcohol more frequently because of holiday-related stress. Client reported he has also been feeling a lot of financial and work-related stress. Additionally, he is having trouble with his marriage. He said he is experiencing conflict with his extended family and can't turn to them for advice.*

Assessment*: Depressed mood with substance abuse. Client is under a lot of situational stress with limited emotional support. When this therapist brought up the possibility of taking anti-depressant medication, he said he would consider it.*

Plan*: Give client psychiatric referral for medication evaluation. Advise DBT skills to aid coping. Schedule session one week from today.*

Therapist Name: *Susan Smith*

Susan Smith ***Date:*** *01/04/21*

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DAP Progress Note

Name: _____ Date of Birth: _____

Date: _____ Time: _____ AM / PM

Data

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Assessment

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Plan

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Therapist Name: _____

Signature: _____ Date: _____

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