**2 Year Conditional Prescribing Log**

**Conditional Prescribing Psychologist:**

**Supervisor (Primary): Supervisor(s) (Secondary):**

**Site:**

**Dates: XX/XX/XXXX – XX/XX/XXXX**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date(s) ofService  | Length of Visit\* | Patient ID | Gen/Age | Description | Treatment Plan |
| 12/02/202212/16/2022 | 60 min45 min | 1 | F/32 | **MH Conditions:** Major Depressive Disorder, Recurrent, Mild**Medical:** Hypothyroidism **Psych Medications:** None**Medications:** Levothyroxine 100mcg**PCP: Jane Smith, MD** | 12/02/20221. Initiated ….
2. Reviewed labs
3. Discussed management of side effects associated with…

12/16/20221. Reviewed behavioral interventions
2. Discussed Rx and adjusted dose
 |
|  |  |  |  | **MH Conditions:** **Medical:** **Psych Medications:** **Medications:** |  |
|  |  |  |  | **MH Conditions:** **Medical:** **Psych Medications:** **Medications:** |  |
|  |  |  |  |  |  |

Total Number of Unique Patients:

Total Hours of Patient Care:

\*Includes face-to-face time and time to coordinate care

|  |  |  |  |
| --- | --- | --- | --- |
| Date of supervision | Duration  | Brief Summary/Content of Supervision | Method of Supervision |
| 12/02/2022 | 57 minutes |  | Face-to-Face  |
| 5/02/2023 | 62 minutes |  | Zoom |
| 5/16/2023 | 15 minutes  |  | Phone  |
|  |  |  |  |

Total One-On-One Supervision Hours: