



Cardiac Risk Screener Report

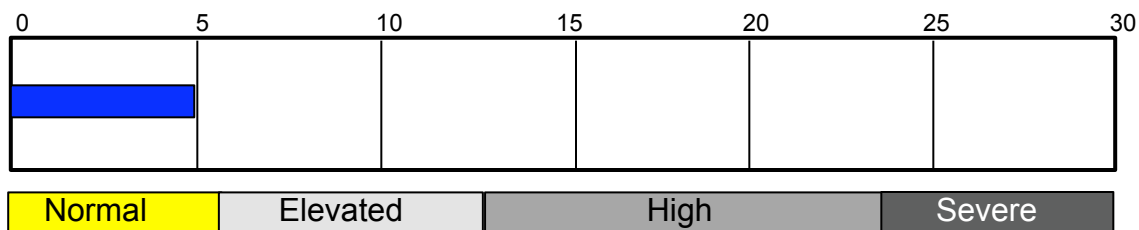
Patient: CARL DOWD

Date of Birth: 1/1/1948

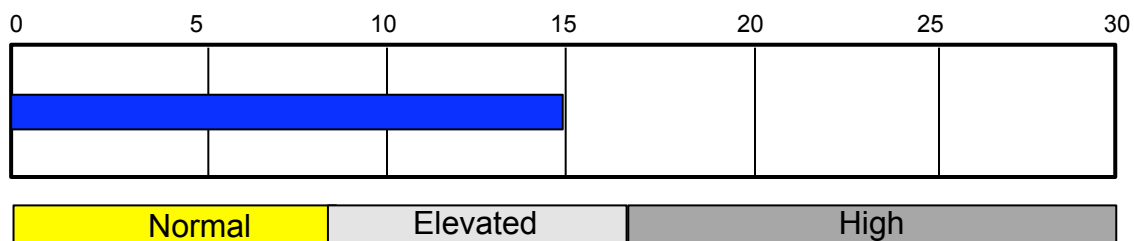
Assessment Date 10/3/2008

Assessment Area	Within Range	Out of Range
CLINICAL		
Overall: How well getting along emotionally	Fairly well	
Depression (normal range = 1.0 - 5.4)	5	
Anxiety (normal range = 1.0 - 7.8)		15.0 (Elevated)
Panic disorder	No	
Bipolar disorder	No	
Bereavement	No	
Psychosocial risk factors (normal = 0-6)		10
DRUG AND ALCOHOL		
Wanted/need to cut down (past year)	No	
Used more than meant to (past year)	No	
TREATMENT		
Attending psychotherapy	No	
Has a prescription for psychotropic medication		Yes
Taking medication as prescribed		Not taking as prescribed
Side effects are a problem		Slight problem
Medication is helping	Somewhat	
Feels depression treatment may be helpful	Already in treatment	

Depression Symptom Severity



Anxiety Symptom Severity



This report reflects only the information supplied by the patient and is not intended to replace clinical judgement. The physician retains full responsibility for decisions regarding treatment. (c) 2003 Polaris Health Directions, all rights reserved. Contact Polaris at: (267) 583-6336 -- info@polarishealth.com -- www.polarishealth.com



Cardiac Risk Screener Report

Patient: CARL DOWD	Date of Birth: 1/1/1948	Assessment Date: 10/3/2008
---------------------------	--------------------------------	-----------------------------------

Patient History And Current Concerns Relating To Depression

Family history of depression	No	
Treated in past for depression		Yes – medication
Past treatment was helpful	No	
Troubled by feelings of sadness or depression		Yes

Modifiable Physical/Behavioral Risk Factors Reported

Risk Factor	Absent	Present
Smokes cigarettes	X	
Sedentary lifestyle		X
Diabetic	X	
Overweight/Obese		X
High blood pressure		X
High cholesterol		X
Uses alcohol or drugs (non-medically) to improve mood	X	

Non-Cardiac Medications Taken

Condition	No	Yes
Blood Pressure		X
Diabetes	X	
Cholesterol		X
Weight Control	X	
Heartburn	X	
Pain		X
Smoking Cessation	X	



Cardiac Risk Screener Report

Patient: CARL DOWD	Date of Birth: 1/1/1948	Assessment Date: 10/3/2008
---------------------------	--------------------------------	-----------------------------------

Psychosocial Risk Factors (for Adverse Cardiac Events)

Risk Factor	Absent	Present
Frequent feelings of sadness	X	
Life is impacted (e.g., socializing, work, etc.) by emotional problems		X
Find less pleasure in life		X
Hopelessness or pessimism about the future	X	
Frequently discouraged	X	
Frequently feels hostile		X
Frequently lashes out in anger		X
Frequently feels grumpy or easily annoyed		X
Tends to be impatient	X	
Feels uncertain of being loved by anyone		X
Feels a lot of stress in life	X	
Concerned about loss of interest in sex	X	
Feels that life is meaningless	X	
Does not feel part of a supportive neighborhood/religious community		X
Does not feel certain of emotional support from friends or family		X
Would like to go to sleep and not wake up (die)	X	
Does not feel that there is a lot to live for	X	
Feels that no friends really know him/her		X
Feels that life cannot be good unless health is good	X	
Does not feel much love for other people		X
Does not have hobbies or activities that bring pleasure	X	
TOTAL PRESENT: 10 (Note: typically 2 – 6 are present)		



Cardiac Risk Screener Report

(Note: This is how the first page appears if the patient reports thoughts of ending his/her life.)

Patient: CARL DOWD

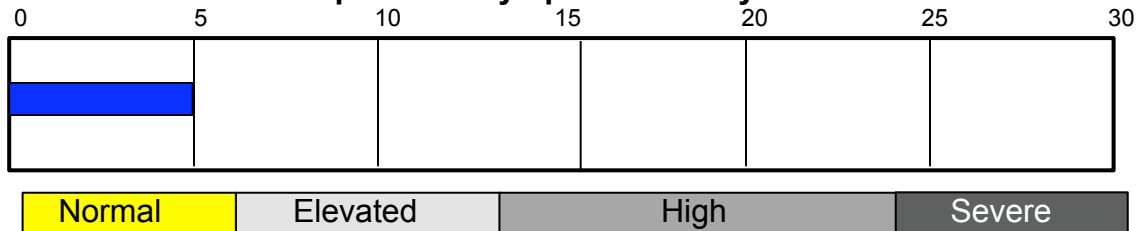
Date of Birth: 1/1/1948

Assessment Date 10/3/2008

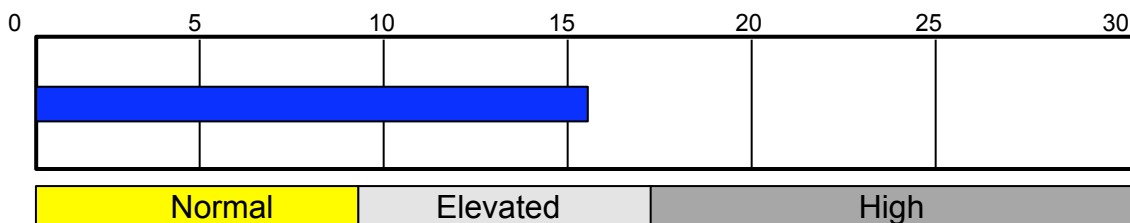
PATIENT REPORTS THAT HE HAS SERIOUSLY CONSIDERED ENDING HIS LIFE (KILLING HIMSELF) DURING THE PAST TWO WEEKS

Assessment Area	Within Range	Out of Range
CLINICAL		
Overall: How well getting along emotionally	Fairly well	
Depression (normal range = 1.0 - 5.4)	5	
Anxiety (normal range = 1.0 - 7.8)		15.0 (Elevated)
Panic disorder	No	
Bipolar disorder	No	
Bereavement	No	
Psychosocial risk factors (normal = 0-6)		10
DRUG AND ALCOHOL		
Wanted/need to cut down (past year)	No	
Used more than meant to (past year)	No	
TREATMENT		
Attending psychotherapy	No	
Has a prescription for psychotropic medication		Yes
Taking medication as prescribed		Not taking as prescribed
Side effects are a problem		Slight problem
Medication is helping	Somewhat	
Feels depression treatment may be helpful	Already in treatment	

Depression Symptom Severity



Anxiety Symptom Severity



This report reflects only the information supplied by the patient and is not intended to replace clinical judgement. The physician retains full responsibility for decisions regarding treatment. (c) 2003 Polaris Health Directions, all rights reserved. Contact Polaris at: (267) 583-6336 -- info@polarishealth.com -- www.polarishealth.com