

# SOAP Notes at a Glance

*What belongs in each section, what does not, and the verbs that make it clinical.*



## Subjective

*The client's story in their words.*

### BELONGS HERE

- Direct quotes from the client
- Reported symptoms and history
- Stated feelings and concerns
- Reason for visit in their words

### KEEP OUT

- Your interpretation
- Diagnostic labels
- Loaded words (manipulative, etc.)

### POWER VERBS

*reported, stated, described, denied, endorsed, identified*



## Objective

*What you observed and measured.*

### BELONGS HERE

- Appearance, affect, behavior
- Orientation, speech, thought
- Screener scores (PHQ-9, GAD-7)
- Attendance and collateral data

### KEEP OUT

- Opinions or guesses
- Anything you cannot point to
- Client's internal experience

### POWER VERBS

*observed, presented, scored, demonstrated, appeared, measured*



## Assessment

*Your clinical reasoning.*

### BELONGS HERE

- Synthesis of S and O
- Diagnosis and formulation
- Risk and protective factors
- Strengths and context

### KEEP OUT

- Restating the diagnosis
- New data not in S or O
- One-line shrug (doing well)

### POWER VERBS

*consistent with, suggests, indicates, reflects, warrants, formulates*



## Plan

*What happens next and by when.*

### BELONGS HERE

- Specific interventions
- Frequency and dates
- Named parties and referrals
- Safety plan and homework

### KEEP OUT

- Vague monitoring language
- Plans with no owner or date
- Copy-paste from last session

### POWER VERBS

*will attend, will complete, will contact, referred to, coordinate with, schedule*