

Psychiatric Pre-Operative Evaluation Report

Patient Name: Jane Doe

DOB: 02/15/1982

Date of Evaluation: 09/26/2023

Evaluator: Carrie Friedman, MSN, FNP-BC, PMHNP-BC

Practice: Brain Garden Psychiatry

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Location: Virtual (Telepsychiatry) – California

Reason for Referral

Psychiatric consultation requested by John Jones, M.D. to evaluate psychological readiness for elective cosmetic procedure (abdominoplasty with liposuction). The goal is to assess mental and emotional preparedness, screen for contraindications such as body dysmorphic disorder (BDD), and provide recommendations to support optimal surgical outcomes and recovery.

Source of Information

- Direct clinical interview via HIPAA-compliant telehealth platform
- Patient self-report
- No external collateral or records reviewed

Medical & Surgical History

Medical History:

Mrs. Doe reports overall good physical health. She denies any history of chronic medical conditions, including **cardiovascular, pulmonary, neurologic, endocrine, gastrointestinal, hepatic, renal, or autoimmune disorders**. Her most recent physical exam was completed in **June 2023** with her primary care provider. She reports **seasonal allergies**, which are managed with daily loratadine. She takes oral contraceptives (Lo Loestrin Fe) and reports no hormone-related mood instability. She is not currently under the care of any other specialists and denies current medication side effects or medical complaints.

Surgical History:

Mrs. Doe has undergone two Cesarean sections, both of which were well-tolerated without complication. She reports no adverse reactions to anesthesia and describes her prior recoveries as

smooth, with adequate emotional support and pain management. She has not had prior cosmetic or bariatric procedures.

Medications:

- **Lo Loestrin Fe** (oral contraceptive)
- **Loratadine 10 mg daily** (Claritin) for seasonal allergies

Supplements:

- **Magnesium Glycinate 200 mg daily**
- **CBD gummies (THC-free)** as needed for insomnia and stress

Mrs. Doe reports taking these supplements consistently and responsibly, without adverse effects. No interactions or contraindications are currently noted. She is not taking any psychiatric or other prescription medications at this time.

Psychiatric Interview & Clinical Observations

Presentation:

Mrs. Doe is a 41-year-old female who appeared on time for the scheduled appointment, appropriately dressed and well-groomed. She was cooperative, maintained good eye contact, and demonstrated full orientation to person, place, time, and situation. Affect was congruent, mood described as “hopeful but nervous,” and speech was fluent, goal-directed, and of normal rate and volume.

Psychiatric History:

Mrs. Doe reports a prior diagnosis of generalized anxiety disorder (GAD) dating back to her early 20s, managed without medication. She denies current symptoms meeting threshold for GAD, panic disorder, or major depressive episode. She has never experienced psychosis, mania, self-harm, or suicidal ideation. No history of psychiatric hospitalization or outpatient treatment beyond brief counseling support during postpartum years.

Substance Use:

No history of substance use disorder. Mrs. Doe reports occasional use of CBD gummies “as needed” for sleep or anxiety, no THC use. No alcohol dependence; social drinker.

Cognition and Insight:

Thought process was logical and organized. Insight and judgment are intact. She articulated a well-reasoned understanding of the risks, benefits, alternatives, and limitations of the proposed procedure. No signs of impaired executive function or delusional thinking.

Body Image & BDD Screening:

Mrs. Doe denies excessive preoccupation with perceived physical flaws. She reports wanting the procedure to address excess abdominal skin and muscle laxity after two pregnancies and 50 lb. weight loss. Her expectations are realistic: she does not expect perfection, but seeks improved comfort in clothing and self-confidence. There is no indication of BDD per DSM-5 criteria. She does not engage in compulsive mirror checking, reassurance seeking, or surgical shopping.

Psychosocial Functioning:

Mrs. Doe is married with two children and works as a project manager. She describes her marriage as supportive and reports open communication with her spouse about the upcoming procedure. She anticipates help with childcare and home responsibilities during recovery. She has a close circle of friends and access to emotional support if needed.

She acknowledges mild anticipatory anxiety about pain, anesthesia, and possible complications—appropriate for context. She has previously undergone two C-sections and tolerated both the physical and emotional recovery well.

Coping Skills:

Mrs. Doe uses a combination of mindfulness, yoga, journaling, and social connection to manage stress. She tracks her mood on a self-care app and has high emotional literacy. No avoidance behaviors or maladaptive coping observed. She does not meet criteria for an anxiety or depressive disorder at this time.

Diagnostic Impressions (DSM-5-TR):

Z01.818 Encounter for pre-procedural examination

F41.1 Generalized Anxiety Disorder (history only; currently subclinical)

Evaluation of Capacity

Mrs. Doe demonstrates full decisional capacity. She understands the nature of the surgical procedure, has weighed the risks and benefits, is able to articulate her reasons for pursuing surgery, and has no evidence of impaired cognition, judgment, or coercion.

Functional Psychiatry Assessment

No signs of nutritional depletion, inflammatory symptoms, or neurocognitive deficits were noted. Mrs. Doe is not currently on psychiatric medication. She denies recent disruptions in sleep, appetite, or energy. Lifestyle factors (movement, social rhythm, stress management) appear balanced.

Mrs. Doe uses adaptogenic and nutraceutical support (CBD, magnesium glycinate) effectively. No supplement overload or contraindications noted. She has a stable supplement and hormonal contraceptive history and reports no significant psychiatric sensitivity to prior medications or anesthetics.

Recommendations

Psychiatric Clearance

Mrs. Doe is psychologically appropriate to proceed with the planned elective abdominoplasty and liposuction procedure. No psychiatric contraindications are identified.

Supportive Recommendations:

1. **Pre-op anxiety management:** Encourage continuation of mindfulness practices; consider scripted breathwork or guided audio meditations (Insight Timer app) pre-op and during recovery
 2. **Post-op emotional support:** Normalize transient post-surgical mood shifts and body image dysregulation. Recommend that patient have check-ins with trusted support persons during initial recovery.
 3. **Sleep hygiene:** CBD appears effective. Recommend re-evaluation only if insomnia becomes prolonged.
 4. **Nutritional support:** Encourage protein-rich, anti-inflammatory diet post-op to support healing and mood stability.
 5. **Post-op coping plan:** Mrs. Doe has sufficient insight to self-monitor for symptoms of anxiety or depressive relapse and is encouraged to seek follow-up if needed.
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Prepared and submitted by:



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