

**MEDICAL SOCIAL WORK PROGRESS NOTE FOR REMOTE VISIT USING  
TELECOMMUNICATION TECHNOLOGY**

Start Time: \_\_\_\_\_ : \_\_\_\_\_ End Time \_\_\_\_\_ : \_\_\_\_\_

On site visit    Phone contact

<b>Patient Name:</b>	<b>ID#</b>
<b><u>Current Psychosocial Status/Findings:</u></b> <span style="float: right;">Update to comprehensive health assessment</span>	
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<b><u>Assessment:</u></b>	
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
<b><u>Interventions:</u></b>	
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
Technology (application/device) used: _____	
Who is onsite with the patient during the visit _____ (names)	
Assistance provided <input type="checkbox"/> Yes <input type="checkbox"/> No Describe _____	
<b><u>Plan For Next Visit:</u></b>	
<hr/> <hr/> <hr/> <hr/>	
<b>Social Worker Signature</b> _____ <b>Date</b> _____	