TMS CONSULTATION
Transcranial magnetic stimulation

20180605
TMS

Genesis Behavioral Health

Name: _____ **DOB:** _____ **Age:** _____ **Date:** _____

Name of others with you today: Spouse/Other: ***Name, relationship to you:*** _____

When was the first time you were depressed? **(best estimate)**

When was the first time you were treated for depression? **(best estimate)**

When did this episode of depression begin? **(best estimate)**

What symptoms of depression are the MOST DIFFICULT for you?

☐ Low energy/motivation ☐ Down mood ☐ Difficulty enjoying pleasurable activities ☐ Difficulty sleeping
☐ Frequent negative thoughts (about yourself, the world, and the future) ☐ Thoughts of not wanting to go on living

In what areas is depression affecting your ability to function normally?

☐ Work/school performance ☐ Social Interaction ☐ Family/Home responsibilities ☐ Hobbies/Interests
☐ Activities of daily living (examples: difficulty getting out of bed, grooming yourself as you normally do)

What SIDE EFFECTS have you experienced from your medications?

☐ Sedation/Tiredness ☐ Anxiety ☐ Suicidal Thoughts ☐ Sexual Dysfunction ☐ Insomnia ☐ Blurred vision
☐ Constipation ☐ Headache ☐ Weight Gain ☐ Tremor ☐ GI upset/Nausea ☐ Dry mouth
☐ Irritability/Anger ☐ Sweating ☐ Withdrawal symptoms

What OTHER FACTORS have contributed to your depression?

☐ Anxiety ☐ Chronic pain ☐ Medical problems ☐ Financial stressors
☐ Relationship problems ☐ Painful childhood ☐ Traumatic experiences ☐ Unresolved grief

PSYCHOTHERAPY

◯ Yes ◯ No Have you had psychotherapy for depression? What kind: ☐ CBT ☐ Other _____ **☐ Unsure**

Approximately how many sessions? _____ **When?** _____

ADDITIONAL CONSIDERATIONS FOR TMS

◯ Yes ◯ No ◯ Unsure Have you ever received TMS with a successful outcome? If so, when: _____

◯ Yes ◯ No ◯ Unsure Have you received ECT (electroconvulsive therapy)?

◯ Yes ◯ No ◯ Unsure Do you have a history of seizure disorder?

◯ Yes ◯ No ◯ Unsure Have you had chronic psychotic symptoms, such as hallucinations present in schizophrenia?

◯ Yes ◯ No ◯ Unsure Do you have an implanted magnetic-sensitive medical device inside your head or other implanted metal items, including but not limited to a cochlear implant, implanted cardioverter defibrillator (ICD), pacemaker, vagus nerve stimulator (VNS), or metal aneurysm clips or coils, staples, or stents. (Note: Dental amalgam fillings are not affected by the magnetic field and are acceptable for use with TMS).

Insurance: ☐ BCBS ☐ Cigna ☐ Humana ☐ Aetna ☐ Other _____

PAST AND CURRENT MEDICATIONS

On the next page is a list of medications. ***IF YOU FILLED IT OUT IN THE PAST,*** **PLEASE FILL IT OUT AGAIN.**

We understand that you may not remember the details, but just do the best you can. It is very important for us to know your past and current medications.

CURRENT and PAST MEDICATIONS

List ALL CURRENT MEDICATIONS, VITAMINS, HERBAL, & SUPPLEMENTS that you are now taking:

Medication, Vitamin, or Herbal	Medication, Vitamin, or Herbal	Medication, Vitamin, or Herbal

List ALL PAST MEDICATIONS that you have taken:

√ if Taking Now or Past	Medication Have you *ever* taken any of these:	dose	When & Why Stopped	When	√ if Taking Now or Past	Medication Have you *ever* taken any of these:	dose	When & Why Stopped	When
□Now □Past	**Ritalin/Methylin**				□Now □Past	**Abilify** (Aripiprazole)			
□Now □Past	**Metadate**				□Now □Past	**Aristada or Maintenna**			
□Now □Past	**Quillivant/Quillichew**				□Now □Past	**Rexulti**			
□Now □Past	**Aptensio**				□Now □Past	**Geodon** (Ziprazidone)			
□Now □Past	**Concerta** (Methylphenidate)				□Now □Past	**Risperdal** (Risperidone)			
□Now □Past	**Focalin (or XR)** (dexmethylphenidate)				□Now □Past	**Invega** (Paliperidone)			
□Now □Past	**Daytrana**				□Now □Past	**Zyprexa** (Olanzapine)			
□Now □Past	**Adderall (or XR)** (dextroamphetamine)				□Now □Past	**Quetiapine** (Seroquel)			
□Now □Past	**Vyvanse**				□Now □Past	**Saphris**			
□Now □Past	**Mydayis**				□Now □Past	**Fanapt**			
□Now □Past	**Dyanavel**				□Now □Past	**Latuda**			
□Now □Past	***Other stimulant***				□Now □Past	**Vraylar**			
□Now □Past	**Strattera** (Atomoxetine)				□Now □Past	**Clozapine**			
□Now □Past	**Kapvay** (Clonidine)				□Now □Past	**Lithium**			
□Now □Past	**Intuniv** (Guanfacine)				□Now □Past	**Depakote** (Valproic Acid)			
□Now □Past	**Prozac** (Fluoxetine)				□Now □Past	**Tegretol** (Carbamazepine)			
□Now □Past	**Zoloft** (Sertraline)				□Now □Past	**Trileptal** (Oxcarbazepine)			
□Now □Past	**Paxil** (Paroxetine)				□Now □Past	**Lamictal** (Lamotrigine)			
□Now □Past	**Luvox** (Fluvoxamine)				□Now □Past	**Topiramate** (Topamax)			
□Now □Past	**Celexa** (Citalopram)				□Now □Past	**Valium** (Diazepam)			
□Now □Past	**Lexapro** (Escitalopram)				□Now □Past	**Xanax** (Alprazolam)			
□Now □Past	**Effexor XR** (Venlafaxine)				□Now □Past	**Ativan** (Lorazepam)			
□Now □Past	**Pristiq** (Desvenlafaxine)				□Now □Past	**Klonopin** (Clonazepam			
□Now □Past	**Cymbalta** (Duloxetine)				□Now □Past	**Lyrica** (Pregabalin)			
□Now □Past	**Wellbutrin** (Bupropion)				□Now □Past	**Neurontin** (Gabapentin)			
□Now □Past	**Remeron** (Mirtazapine)				□Now □Past	**Vistaril** (Hydroxyzine)			
□Now □Past	**Buspar** (Buspirone)				□Now □Past	**Ambien** (Zolpidem)			
□Now □Past	**Trintellix**				□Now □Past	**Lunesta** (Eszopiclone)			
□Now □Past	**Viibryd**				□Now □Past	**Temazepam**			
□Now □Past	**Fetzima**				□Now □Past	**Sonata**			
□Now □Past	**Nefazodone**				□Now □Past	**Belsomra**			
□Now □Past	**Amitriptyline**				□Now □Past	**Trazodone**			
□Now □Past	**Imipramine**				□Now □Past	**Rozerem**			
□Now □Past	**EMSAM**				□Now □Past	**Melatonin**			
□Now □Past	**Nardil**				□Now □Past	**Benadryl** (antihistamine)			
□Now □Past	**Parnate**				□Now □Past	**Other OTC sleep aid**			
□Now □Past	**Ketamine**				□Now □Past	**Aricept** (donepezil)			
□Now □Past	**Provigil** (Modafanil)				□Now □Past	**Namenda** (memantine)			
□Now □Past	**Nuvigil** (Armodafanil)				□Now □Past	**Buprenorphine**			
□Now □Past	**Prazosin**				□Now □Past	**Antabuse** (disulfiram)			
□Now □Past	**Naltrexone** (oral or injectable)				□Now □Past	**Campral** (acamprosate)			