Clinical psychology: generalized anxiety presentation

- Discipline and setting: Clinical psychology, in an outpatient mental-health clinic.
- Patient profile (fictional): A fictional 29-year-old graduate student, has no earlier psychiatric history.
- Presenting complaint: Eight months of persistent worry across work, health, and finances, with trouble sleeping and constant restlessness.
- Assessment findings: A GAD-7 score of 16 indicated severe anxiety. The clinical interview confirmed excessive worry on most days for more than six months. Thyroid function and a basic metabolic panel were normal. Caffeine and substance use were minimal.
- Clinical reasoning (annotated): The working diagnosis is generalized anxiety disorder under DSM-5 criteria. Chronic uncontrollable worry, restlessness, and sleep disturbance beyond six months support it. Panic disorder was ruled out because there were no discrete panic attacks. Social anxiety disorder was excluded because the worry reached beyond social scrutiny. A primary depressive disorder was set aside because low mood was secondary and the mood screen fell below threshold. Hyperthyroidism was ruled out by the normal TSH.
- Management and outcome: The psychologist started cognitive behavioral therapy that targeted worry exposure and cognitive restructuring, added sleep-hygiene work, and discussed an SSRI referral as an option. After 12 weekly sessions the GAD-7 fell to 6, within the mild range.

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