

Practice Assessment

Monique Polanco

Alliance Graduate School of Counseling and the College of Graduate and Professional Programs

GNC602: Measurement and Assessment

Professor George Ramos

March 6, 2023

CONFIDENTIAL

MENTAL HEALTH EVALUATION

Client Name: Robert T.

Date of Evaluation: March 5, 2023

Date of Birth: February 2, 1997

Date of Report: March 6, 2020

Age: 26

Tests Administered: Clinical Evaluation, Mental Status Examination (MSE), Beck Depression Inventory-2 (BDI-2), Beck Anxiety Inventory & Spiritual Well-Being Scale

Client History

Robert T. is a 26 year old male who presented to the evaluation after having a triggering incident at his job about one month ago. Mr. T has a government job as an engineer, a position he has held for about four years. He is also an engineering graduate student. He has been struggling with motivation and sadness after an incident that occurred at work about one month ago. His parents both noted he has lost a significant amount of weight upon their most recent visit a few days ago. Mr. T mentioned his mother taking him to a counselor when he was 12 because he was having a difficult time adjusting to a new middle school. Mr. T described the event that eventually caused him to come in today. He shared that he canceled a presentation at work which he was supposed to give in front of 12 of his colleagues and supervisors minutes before it was set to begin. In addition, the presentation would have put him in the position to earn himself a promotion. This situation has caused him to experience sadness to the point of crying "almost every day lately" and to doubt his place in the Engineering field and therefore lose motivation for his professional job as well as his

school work and attendance. He expressed that has been wondering if the effort of his life was worth it anymore.

Mental Status Examination

Robert T. presented as an aware and responsive 26 year old male. He arrived at the evaluation dressed in casual and appropriate attire. He acknowledged he was unshaven, but otherwise had good hygiene. Throughout the evaluation Mr. T. was able to keep engaged and kept appropriate eye contact. He seemed unable to relax and did not display any tics. When asked questions he responded politely at appropriate speeds, tones, and volumes. Mr. T. understood the reason for his being there and was aware of the correct time and date. Overall he seemed engaged yet sad and lethargic. He became tearful when answering questions, especially when mentioning his parents, throughout the evaluation. Mr. T's ability to recall recent past events was able to be done with noticeable increased effort and concentration. When asked to remember three words immediately he was able to. When asked to remember three words after a five minute delay he was only able to recall one of the three words. Mr. T did not exhibit symptoms of psychosis, and his judgment and understanding were good. Mr. T admitted to thinking about his own death a lot recently, stating that he has wondered if it would even matter if he was gone. Mr. T. did not make any mention of suicidal ideation or plans to attempt suicide. Mr. T seemed to have an overall accurate sense of his situation and was able to relay that situation in an understandable manner.

Presenting Symptoms

Mr. T. reported symptoms of stress, loss of appetite until late in the day and attributed weight loss, difficulty sleeping, difficulty keeping focus on tasks (needing to reread things over and over due to loss of focus and mind going blank), crying everyday, lack of motivation (inability to attend class, calling out or work, not handing in important assignments at work) and thoughts about how it wouldn't matter if his life ended. These symptoms have been present for the past 2-3 weeks. Mr. T has also not responded to his friends and family for the past week because he does not want to pretend that everything is fine. His parents visited him a few days ago, they were both supportive and both were concerned about his significant weight loss.

Mr. T. reported a triggering incident at work about a month ago in which he canceled an important presentation at the very last minute because of his lack of confidence in knowing the content of the presentation well enough. Mr. T reported that this situation was extremely humiliating for him and that he even heard his coworkers discussing how he would never be promoted in the future. After this incident he began skipping classes although he was completing his assignments as he did not want to make any final decisions regarding his future as an engineer. He also began to miss report deadlines after this incident and is avoiding speaking with his supervisor regarding these missed reports. Since the incident he has been experiencing the listed symptoms and feels that his life is "starting to crumble."

Test Results & Interpretation

Validity Statement

Mr. T was engaged and responsive for the duration of the evaluation and assessment process. He gave the impression of understanding the measurements

being taken. All results are considered a valid assessment of his emotional functioning at the time of the evaluation.

Beck Depression Inventory-II (BDI-II)

Mr. T. obtained a 47 on the BDI-II. A score above 40 indicates severe depression. His score indicates severe depression.

Beck Anxiety Inventory (BAI)

Mr. T obtained a score of 22 on the BAI. A score of 16-25 indicates moderate anxiety. His score indicates the higher end of moderate anxiety symptoms.

Spiritual Well-Being Scale (SWB)

Mr. T. scored a 53 on the Spiritual Well-Being scale which indicates a positive view of his relationship with God. He scored a 24 on the Religious Well-Being subscale indicating a moderate sense of religious well-being. She scored a 29 on the Existential Well-Being subscale indicating a moderate level of life satisfaction and purpose.

Diagnosis

Mr. T meets diagnostic criteria for the following DSM 5-TR disorder:

(F32.1) Major Depressive Disorder, Moderate, Single Episode

Treatment Recommendations

Mr. T would benefit from Cognitive Behavioral Therapy (CBT). Mr. T. is currently experiencing moderate levels of anxiety, including symptoms of social anxiety, and

moderate major depressive disorder symptoms. During CBT Mr. T. should learn skills to help him overcome his social anxiety through psychoeducation and role play. He should also utilize cognitive restructuring to address his depressed mood by focusing on his maladaptive thought processes. If he does not experience any benefit from CBT he may consider a psychiatric evaluation and eventually medication.

Conclusion

Mr. T. is a 26 year old male who presented to his evaluation with symptoms of anxiety, loss of appetite, sadness, and lack of motivation for the past 2-3 weeks. All which began after an event at work which occurred about a month ago. He reported canceling a presentation just minutes before it was set to begin. He canceled the presentation in this manner due to his feeling of being underprepared. Results of the BDI-II indicate that he is suffering from severe depression. Results of the BAI indicate that he currently has moderate anxiety symptoms.

Considering the clinical evaluations, the Mental Status Examination, the results of the tests Mr. T was administered, and the behavioral observations during his evaluations, Mr. T. meets the diagnostic criteria for Major Depressive Disorder, Moderate, Single Episode. CBT is recommended as treatment, in the event that it is unsuccessful he should consider a psychiatric evaluation so that he can consider medication to help alleviate his symptoms.

Monique Polanco