

CONFIDENTIAL

MENTAL HEALTH EVALUATION

Client Name: Robert T.

Date of Evaluation: Jan. 7, 2020

Date of Birth: Jan. 2, 1994

Date of Report: Jan. 7, 2020

Age: 26

Tests Administered: Clinical Evaluation, Mental Status Examination (MSE), Robert Thompson Depression Inventory-2 (BDI-2), Robert T. Anxiety Inventory, Spiritual Well-Being Scale & Psychiatric Diagnostic Screening Questionnaire (PDSQ)

Client History

Robert Thompson is a 26-year-old graduate student in Engineering experiencing high-stress levels due to work and academic demands. He holds a government job as an engineer and has been in this position for almost four years. Robert reported that he has never received mental health treatment, but his mother took him to a counselor briefly when he was 12. He has struggled to sleep for the past two weeks and has difficulty getting ready for work or attending his classes. Robert has missed four days of work and has not responded to a voicemail from his supervisor, who has concerns about his recent absences and missed deadlines. He has been experiencing forgetfulness and loss of appetite and avoids talking to family and friends.

Robert has also been questioning his life purpose and listening to self-development podcasts. However, these thoughts have led him to contemplate death, and he has cried almost daily. Robert's recent stressor is an incident at work where he failed to deliver a presentation to 12 colleagues and supervisors, which would have made him eligible for the promotion. He canceled just minutes before the presentation and has struggled with the aftermath. His colleagues have questioned his knowledge and stated that he will never get promoted. This incident has caused Robert to question his plans and has led him to stop attending classes and avoid his friends. He has also recently started dating a girl but has not been in contact with her lately, citing not wanting to be seen in his current state.

Mental Status Examination

Robert Thompson is a 26-year-old male graduate student in Engineering; he appeared older than his stated age, and his look had physically established symptoms of depression and anxiety. He presented as sad, and lethargic and had difficulty recalling recent events and dates. Robert was tearful throughout the evaluation and had difficulty recalling recent events, such as dates of work incidences and his total number of absences. He reported experiencing difficulty falling asleep and having a loss of appetite in the morning. Additionally, he reported that he has been unable to focus and experiencing forgetfulness, indicating possible concentration and memory deficits.

Robert's affect was appropriate to his reported symptoms, and he exhibited an appropriate range of emotions, such as sadness and tearfulness, consistent with his reported stressors. However, his effect was somewhat constricted as he reported feeling numb and uninterested in talking to anyone. His mood appeared to be sad and depressed, which was consistent with his reported feelings of hopelessness and worthlessness.

Cognitive functioning was assessed by evaluating Robert's immediate and delayed recall of three words, which he could recall immediately but had difficulty remembering after a 5-minute delay. Robert also demonstrated slower processing speed, correcting himself twice while completing simple mathematical computations.

Robert's symptoms indicate a possible depressive and anxious disorder, which may be exacerbated by the stressors he is currently experiencing in his academic and work life. Further assessment and treatment are recommended to address his symptoms and improve his quality of life.

Presenting Symptoms

During the clinical assessment session, Robert Thompson, a 26-year-old male graduate student in Engineering, reported experiencing significant stress due to his current work and academic demands. He presented symptoms of significant loss of appetite, difficulty sleeping, forgetfulness, decreased motivation, and significant emotional distress. He reported having missed work and classes and struggled with feelings of inadequacy after a recent incident at

work where he was publicly humiliated during a presentation that would have made him eligible for the promotion.

Robert also reported feeling hopeless about his future and questioning his purpose in life. He described experiencing significant anxiety and depressive symptoms, including feelings of worthlessness, hopelessness, and suicidal ideation. He reported crying almost daily and having difficulty managing his daily activities.

During the assessment, Robert appeared sad and lethargic, with some difficulty recalling recent events and demonstrating slowed cognitive processing. His hygiene was good, but his grooming was poor, and he appeared to have lost significant weight.

Robert's presentation indicates the need for immediate mental health intervention and treatment to address his symptoms and improve his functioning. Further assessment and evaluation are necessary to determine the most appropriate course of treatment, which may include therapy, medication, or a combination of both.

Test Results & Interpretation

Validity Statement

Robert T. was able to sustain attention and concentration throughout the evaluation and assessment process and appeared to understand the contents of the assessment measures administered to him. All results are considered a valid assessment of her present emotional functioning.

Robert Depression Inventory-II (BDI-II)

Robert T. scored 45 on the BDI-II, indicating that he endorsed symptoms of depression on the lower end of the extreme range. A score between 40 and 60 is indicative of extreme depression.

Robert Anxiety Inventory (BAI)

Robbert T. obtained a score of 22 on the BAI, indicating that she endorsed anxiety symptoms on the higher end of the moderate range. A score between 16 and 25 is indicative of moderate anxiety.

Psychiatric Diagnostic Screening Questionnaire (PDSQ)

Results of the PDSQ indicated that Robbert T. endorsed items that correspond with the diagnoses of Major Depressive Disorder, scoring an 11 on the subscale and exceeding the cut-off. Furthermore, scoring an eight on the Generalized Anxiety Disorder sub-scale exceeded the cut-off. Robbert T.

the total raw score was 22, corresponding to a T-Score of 43, indicating "moderate" symptoms.

Spiritual Well-Being Scale (SWB)

Robbert T. scored a 37 on the Spiritual Well-Being scale, indicating a "moderate sense of religious well-being".

Diagnosis

Robbert T. meets the diagnostic criteria for the following DSM 5 disorders:

(F41.1) Moderate Anxiety Disorder

(296.21) Major Depressive Disorder, Mild, Single Episode

Treatment Recommendations

The treatment recommendations for Robbert T. would depend on various factors, including the severity and duration of his symptoms, his personal preferences, and his medical and psychiatric history. However, some potential treatment options based on his diagnoses could include:

Psychotherapy: Cognitive-behavioral therapy (CBT) is an evidence-based therapy that can effectively treat anxiety and depressive disorders. CBT can help Robbert identify and challenge negative thoughts and beliefs contributing to his symptoms, learn coping strategies to manage his anxiety and depression, and develop a plan for returning to work and school.

Medication: Antidepressants and anti-anxiety medications can effectively treat symptoms of anxiety and depression. Robbert may benefit from medication management with a psychiatrist to help alleviate his symptoms.

Lifestyle changes: Robbert may benefit from lifestyle changes such as regular exercise, healthy eating habits, and stress reduction techniques such as mindfulness or relaxation exercises.

Support groups: Support groups can provide a sense of community and belonging to individuals with anxiety and depression. Robbert may benefit from attending a support group to connect with others experiencing similar struggles.

Work and school accommodations: Robbert may benefit from working with his employer and professors to develop a plan for returning to work and school with accommodations such as flexible scheduling or reduced workload.

Robbert must work with a mental health professional to determine the most appropriate treatment plan.