

CONFIDENTIAL

MENTAL HEALTH EVALUATION

Client Name: Robert T.

Date of Evaluation: March 5, 2023

Date of Birth: June 2, 1997

Date of Report: March 6, 2023

Age: 26

Tests Administered: Clinical Evaluation, Beck Depression

Inventory-2 (BDI-2), Beck Anxiety Inventory, Spiritual Well-Being Scale & Psychiatric

Diagnostic Screening Questionnaire (PDSQ)

Client History

Robert Thompson is a single 26-year-old male who lives alone. He self-referred after following the suggestion of seeking professional help from his parents. For the past four years, he has held a position as an engineer in a government branch. Mr. T conveyed being under pressure due to both work and school responsibilities. He reported a lack of sleep, helplessness, and loss of appetite. His last romantic relationship was his sophomore year of ungraded, which lasted over a year and ended due to his girlfriend moving to another state. He expressed not having many close friends. Mr. T reported calling out formwork and not attending classes. His professors have granted him additional time for his work; however, he is still determining if his supervisor is extending the same grace. Mr. T has yet to listen to the voice message or return a call from his work. The client reported seeing a therapist in the past and denied any medical conditions. Mr. T is seeking psychotherapy to address his unhappiness, lack of concentration, and feelings of inadequacy.

Mental Status Examination

Mr. T is a 26-year-old male who presented as very well-mannered and pleasant. Although he was well-dressed and exhibited good hygiene, his hair was not groomed, and it appeared he had not shaved in the days. Mr. T self-reported being unable to upkeep himself due to his depressive state. During the session, Mr. T could not keep consistent eye contact, which increased when he admitted to feelings such as humiliation, lack of sleep, and inability to complete essential tasks. The client seemed very anxious when expressing work-related incidents. Mr. T indicated being aware of the question he was being asked, and he could articulate and explain his symptoms and stressors. He detailed the work incident that led to his symptoms via canceling meetings that could have led to promotions due to unpreparedness. He had already felt bad about canceling the meeting last meeting; however, his feelings were perpetuated when he heard rumors that his co-workers thought that he was not good enough at his current job role. This incident led him to feel self-doubt not only in his work but also extends to his choice of graduate studies and overall led him to question his life. Mr. T has disclosed that he has been experiencing sleep disturbance, lack of concentration, and episodes of lamentation and sadness. He admitted to calling from work four times in the past two weeks. In addition, he had not attended classes for the past three weeks. Mr. T appears anxious about his employment because his manager had been trying to reach and left him a message, which he had never responded to. Client admitted to being aware of the possible reason for the call and is very apprehensive of the outcome if and when he spoke to his supervisor. Mr. T reported lack of communication with anyone in his support system with the exception of some returned messages with his mother. He described a visit from his parents in which his parents helped him clean his apartment, lent him a listening ear and motivated him to seek help. It appears that his parents are his support system.

Presenting Symptoms

Mr. T reported that lack of sleep, unabled to keep focus, unable to complete task, lack of motivation, poor apatite, sadness and crying. Client expressed self petty and pessimistic outlook on life.

Test Results & Interpretation

Validity Statement

Mr. T could sustain concentration and engagement throughout the evaluation and examination process and comprehend the scope of the assessment criteria he took. All outcomes are deemed accurate appraisals of his current pretesting emotional state.

Beck Depression Inventory-II (BDI-II)

Mr. T scored 47 on the BDI-II, indicating that he endorsed symptoms of severe depression of depression at the highest range level, and a score signifying extreme depression.

Beck Anxiety Inventory (BAI)

Mr. T. achieved 22 on the BAI, revealing that he endorsed anxiety symptoms on the more heightened end of the mild range. A score between 22 and 35 is expressive of moderate anxiety.

Psychiatric Diagnostic Screening Questionnaire (PDSQ)

The outcome of the PDSQ indicated that Mr. T. supported areas that correspond with the diagnoses of Major Depressive Disorder, scoring an 11 on the subscale and exceeding the cut-off and scored a 10 on the subscale and exceeding the cut-off.

Spiritual Well-Being Scale (SWB)

Mr. T scored a 57 on the Spiritual Well-Being scale, indicating a score in the range of 41 – 99 reflects a moderate sense of spiritual well-being; he scored a 29 on the Religious Well-Being

subscale, Moderate indicating a core in the relationship with god on a range of 21 – 49 reflect a moderate sense of religious well-being. Furthermore, he scored a 24 showing score in the range of 21 – 49 suggests a moderate level of life satisfaction and purpose

Diagnosis

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

(296.33) Major Depressive Disorder, Severe, Recurrent Episode

(300.02) Generalized Anxiety Disorder

Treatment Recommendations

Mr. T will be referred to a high level of care for a full psychological evaluation and possible medication management. This will allow for depressive symptoms stabilization. He will also benefit from weekly therapy sessions with Cognitive Behavioral Therapy (CBT) modality.

Conclusion

Robert Thompson is a single self-referred 26-year-old male. He presents symptoms of depression and anxiety which began two weeks ago after he failed to complete a presentation at work. Mr. T has been unable to attend a school or work regularly and has failed to fulfill his responsibilities.

Results of the BDI-II I indicated that he endorsed symptoms of severe depression at the highest range level. Results of the BAI revealed that he endorsed anxiety symptoms on the higher end of the mild range. Mr. T. supported areas that correspond with the diagnoses of Major Depressive Disorder. He should receive will receive weekly CBT interventions to address his

symptoms, furthermore, he will be referred for a psychiatric evaluation.

Daylyn Bhavsar-Padilla -MHC-T

Clinician Name and Credential

Daylyn Bhavsar-Padilla

Signature