

Jolly Charleston

Alliance University

Measurement Assessment

Dr. Christian

March 10th, 2023

CONFIDENTIAL
MENTAL HEALTH EVALUATION

Patient's Name: Anna
Date of Birth: March 10, 1999
Age: 24 years

Date of Evaluation: March 1, ,2021
Date of Report: March 6, 2023

Education: College Graduate
Occupation: Unemployed
Current Medications: None

Client History

Anna is a 24-year-old female who presented to the evaluation after being referred by Dr. R.N. for concerns about attentional functioning. Anna is a college graduate who majored in fashion. Anna shared with Dr. R.N. that she has no children but wants to have them with her boyfriend. Anna lived and has been with her boyfriend for two years. Anna shared she was raised in a hostile environment. Also, Anna shared she did not have a permanent home. Anna mentioned she had a tough time growing up and was bullied a lot in school. She reported that she had a great relationship with her brother until he got married; he could no longer mediate her strained relationship with their mother. As a result, she appeared to feel inadequate and like a failure to the family. In addition, she suffered from an eating disorder and alcohol dependence due to her feelings of inferiority.

During her time in college in Massachusetts, Anna attempted suicide twice, which led to her transferring to a college nearer home. As a result, she seems incapable of holding meaningful relationships because of her alcoholism and eating disorder. Her clothes at one session was a tennis skirt and a football jersey, with pigtails, were inappropriate for the weather and setting.

Additionally, she would frequently break into songs and seem sexualized at times. Occasionally, she behaved childishly, throwing tantrums if other patients did not give her what she wanted.

Anna mentioned that she had never received mental health treatment as a child. Still, as time proceeded, she began attending therapy as an adult for a longstanding history of anxiety and depression that after high school had worsened. As a result, Anna's anxiety and depression started to improve. However, Anna stated that she noted improvements in mood symptoms, she has also experienced difficulties with attention and concentration in recent years.

Mental Status Examination

The purpose of this evaluation is to test Anna's ability to comprehend the questions that she was being asked.

Anna presented as a self-aware and insightful 24-year-old female. She arrived on time for her appointment and was unaccompanied. She was casually dressed and neatly groomed, and her social skills were appropriate. She was fully cooperative throughout the evaluation.

Anna appeared to be highly anxious, especially during tests involving measures that were perceived to be difficult for her, such as mental and arithmetic. Her anxiety negatively impacted her performance on some measures. She was an excellent recorder, providing all necessary background information and symptoms.

In addition, Anna's attention and concentration were distracted. Also, Anna performed in the expected range on other achievement tests, including reading, spelling, and sentence comprehension. Anna was able to communicate very well. She had the ability to explain her symptoms and stressors. Anna was able to exchange information profoundly but did not have the capacity to do simple math equations. As a result, she retained all the information she encoded

after a delay and performed well in general. As far as thought content was concerned, she had a logical and coherent thought process. No symptoms indicative of psychosis were observed. Anna's insight, judgment, and impulse control were good.

Presenting Symptoms

Anna testified to various symptoms during the assessment. As previously mentioned, Anna reported her feelings of inadequacy and that the failure of the family seemed to make her misbehave. In addition, her feelings of inferiority seem to exacerbate both her alcohol addiction and her eating disorder. She indicated that she had been abandoned by her mother.

Anna has had at least two suicide attempts since college. She reportedly suffered from anxiety and depression. She described difficulty concentrating at times. She reported that in 2009 she had multiple surgeries, including reconstructive surgery for a bile duct cyst. Also, her irregular menstruation is being treated with medication.

Test Results & Interpretation

Validity Statement

Anna 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 her. Therefore, all results are considered a valid assessment of her present emotional functioning.

Beck Depression Inventory-II (BDI-II)

Anna scored 23 on the BDI-II, indicating that she endorsed symptoms of depression on the lower end of the moderate range. A score between 20 and 28 is indicative of mild depression.

Beck Anxiety Inventory (BAI)

Anna scored 33 on the BAI, indicating that she endorsed anxiety symptoms on the higher end of the moderate range. A score between 22 and 35 is indicative of mild anxiety.

Psychiatric Diagnostic Screening Questionnaire (PDSQ)

Results of the PDSQ indicated that Anna endorsed items that correspond with the diagnoses of Major Depressive Disorder, scoring a 12 on the subscale and exceeding the cut-off and achieving an eight on the Generalized Anxiety Disorder sub-scale and exceeding the cut-off. In addition, Anna's total raw score was 42, corresponding to a T-Score of 52, indicating "average" symptoms.

Diagnosis

Anna meets the diagnostic criteria for the following DSM 5 disorders:

(300.02) Generalized Anxiety Disorder

(296.21) Major Depressive Disorder, Mild, Single Episode

Treatment Recommendations

Anna would benefit from receiving Cognitive Behavioral Therapy (CBT) to address her anxiety, worrying, and depressive symptoms. CBT sessions should include psychoeducation to help Anna understand how maladaptive thought patterns contribute to her symptoms. In addition, CBT interventions would consist of cognitive restructuring, problem-solving skills, and relaxation exercises. Anna may also benefit from a psychiatric evaluation, as she might consider taking psychotropic medication if her symptoms do not improve with therapy.

Conclusion

Anna is a 24-year-old female referred by Dr. R.N. for concerns about attentional functioning. She presents with symptoms of anxiety and worry caused by her unstable life

growing up and followed by a depressive episode, which got worse in High School. Anna is currently unemployed due to her symptoms. Results of the BDI-II indicate depressive symptomatology at the lower end of the moderate range. Results of the BAI indicate anxiety symptoms at the higher end of the average range. Anna endorsed items on the PDSQ indicative of a diagnosis of Major Depressive Disorder and Generalized Anxiety Disorder. According to the clinical evaluation, the Mental Status Examination, behavioral observations of Anna, and the results of the tests administered, Anna meets the diagnostic criteria for Generalized Anxiety Disorder and Major Depressive Disorder, Mild, Single Episode. She should receive psychotherapy, applying CBT interventions to address her symptoms. She will also be referred for a psychiatric evaluation.

Clinician Name and Credential

Jolly Charleston Ph.D., LMHC