

Psychological Assessment Report

Patient's Name: Sheila Martin

Date of Birth: Age: 62 years

Education: College Graduate, presently pursuing her master's degree in mental Health

Occupation: unemployed

Current Medications: None Handedness: Right

Evaluation Completed by: Ulonda Jemmott, Peer Assessor

Evaluation Time: 90 minutes (interview)

Reason For Referral: Sheila was referred to by Dr. Gilmore for concerns about fatigue.

HISTORY OF CURRENT SYMPTOMS: The symptoms description and client's history were obtained from an interview with Sheila, and a review of her medical records.

Sheila is a 62-year-old African American Woman, who reported that she identifies as straight CIS-gender. Sheila was born on the Island of Jamaica and migrated to New York for most of her adult life. Sheila has four adult children and is recently divorced, which she states is not a bad thing, but one of the best things that ever happened to her after being married since she was twenty-six years old.

Sheila reported that she is currently residing with her daughters, and stated that she loves every minute of it, knowing that one day soon, they will all be moved out to their own houses, to continue their lives, which she is excited about, and looking forward to. Sheila stated that she grew up in a Christian home, with two older brothers, and five sisters, and she was fifth in line. Sheila stated, there was no type of abuse in or around the family, and her father worked for the government, while her mother was a farmer and homemaker.

Sheila stated that she lost her job three months ago and is not sure how she is going to manage financially to pay her car note, mortgage, buy food, and send her children to school. Sheila stated that her phone, gas, and electric bill had not been paid in months, and feared they would eventually be disconnected. Sheila stated that due to everything she is going through, she found it difficult to get out of bed and does not sleep or eat well, nor have a history of drug or alcohol abuse.

Summary of Initial Investigation and Findings:

At the initial meeting, Sheila presented in a cognizant yet unsettled manner. She has dressed appropriately in a blue dress with an embroidered long-sleeve sweater and black low-heeled shoes. Her hands were firmly clasped in her lap, and her eyes were fixed on mine. I proceeded to ask her, "Did she have any trouble getting to this location; and her response was no, she had good directions." I asked her what brought her here today, and Sheila responded that she was referred to me due to feelings of physical fatigue. Her answers were precise, and intelligent, with a clear thought process. Her speech was normal, and her eye contact and motor activity were normal, but she seemed a little distracted, and kept looking off toward the window, and when I inquired that she seemed a little distracted; Sheila said, "She was worried about her current family and financial ability because she lost her job and needs financial assistance."

PAST MEDICAL, NEUROLOGICAL, PSYCHIATRIC, AND SUBSTANCE USE

HISTORY:

There is no history of past substance abuse, or neurological, or psychiatric disorder. The Client has a history of fatigue and worry.

BIRTH, DEVELOPMENT, AND OCCUPATIONAL HISTORY: Sheila denied any problems with her early childhood development or birth order; and has no family history of mental illness, as far as she can remember.

PSYCHOSOCIAL HISTORY AND CURRENT ADAPTATION:

Sheila is divorced and is currently living with her daughters.

BEHAVIORAL OBSERVATIONS:

Sheila arrived on time for her appointment and was unaccompanied. She was neatly dressed, and well-groomed. Her social skills were adequate, and she was very cooperative and seemed more relaxed and focused as she continued to talk but with deep sighs. Sheila may also be showing symptoms of depression (not wanting to get out of bed, not eating, or sleeping well).

COUNSELING GOALS AND ROLE:

The role of the counselor is to listen empathetically, provide feedback, help the client develop strategies to cope with the present situation, recommend medication if necessary, and follow up weekly with the client for “Talk Therapy.”

INTERVENTIONS:

The counselor could assist Sheila in applying for an Income-building program for women, Food stamp assistance, and possibly low-income housing if Sheila is willing to have her place.

Continued therapy once a week, and a recommendation for antidepressants if needed.

BARRIER TO TREATMENT:

The client can become her barrier to treatment if Sheila has decided to not use any of the recommendations to resolve her problems.

RECOMMENDATION FOR COLLABORATION:

Assist in applying for unemployment, suggest to the client to call all creditors for assistance with payments, suggest updating her resume, apply for the income assistance program, and continue counseling sessions.

LANGUAGE:

Sheila speaks English and adequately articulates.