

CONFIDENTIAL

MENTAL HEALTH EVALUATION

Client Name: Francesca M.

Date of Evaluation: April. 17, 2023

Date of Birth: June. 28, 1985

Date of Report: April. 17, 2023 Age: 38

Tests Administered: Clinical Evaluation, Mental Status Examination (MSE), Francesca M. Depression Inventory-2 (BDI-2), and Francesca M. Spiritual Well-Being Scale, Traumatic Stress Questionnaire (TSQ) & Post-Traumatic Stressed Disorder (PTSD)

Client History

Francesca M is a 38-year-old post graduate student experiencing symptoms of panic attacks and feeling of guilt as a result of the mental, physical and emotional abuse of the past. She complained of loss of appetite, persistent feeling of sadness, low mood, or loss of interest in things that used to be enjoyable as well as oversleeping, the thoughts of which have led her to contemplate death. Frances reported that she has never received mental health treatment; however there was a history of depression from the mother's lineage.

Francesca had been sexually molested at the age of six by two different church members, (a woman and a man) also; she had been physically and emotionally abused through constant whipping and neglect. She found it difficult to concentrate; she has become sluggish and agitated to the extent that it's having a negative effect on her academics and work. There was also a report of panic attacks, and feeling of guilt, all of which has resulted in her, questioning her life purpose and weighing suicide as a better option.

Mental Status Examination

Francesca M is a 38-year-old post graduate student; though everything seemed alright by her physical appearance however her mental status evaluation established symptoms of depression and anxiety. She is angry with some people she held accountable for her bitter occurrences and experiences of the past which is now the reason for her thought of guilt. She managed to control

being tearful throughout the evaluation and had difficulty recalling recent events, such as dates of work incidences and his total number of absences. She reported experiencing too much sleep and having a loss of appetite. Additionally, she reported that he has been unable to focus and experiencing lack concentration.

Francesca exhibited an appropriate range of emotions, such as sadness and guilty thought, consistent with her reported stressors. However, her affect was somewhat constricted as she reported feeling uninterested in doing what she used to enjoy. Her mood appeared to be sad and depressed, which was consistent with her reported feelings of hopelessness and worthlessness.

Cognitive functioning was assessed by evaluating Francesca's immediate and delayed recall of some words, which she could recall immediately with no difficulty.

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

Presenting Symptoms

During the clinical assessment session, Francesca M is a 38-year-old post graduate student, presented symptoms of significant loss of appetite, over sleeping, decreased motivation, and significant emotional distress. He reported having some problems relating to her academics and job as a result of her recent lack of concentration.

Francesca also reported feeling hopeless about her future and as well as experiences of significant anxiety and depressive symptoms, including feelings of worthlessness, hopelessness, and suicidal ideation. During the assessment, though Francesca was looking fairly alright with manifestation of slow cognitive processing, but she appeared to have lost significant weight.

Francesca's presentation indicates the need for immediate mental health intervention and treatment to address her symptoms especially the suicide ideation. 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

Francesca M. 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. All results are considered a valid assessment of her present emotional functioning.

Francesca M - Depression Inventory-II (BDI-II)

- Francesca M. scored 42 on the BDI-II, indicating that she endorsed symptoms of depression on the lower end of the extreme range. A score between 40 and 60 is indicative of Extreme Depression.

Spiritual Well-Being Scale (SWB)

Francesca M. scored a 86 on the Spiritual Well-Being scale, indicating a "moderate sense of religious well-being".

- A score in the range of 41 – 99 reflects a sense of moderate spiritual well-being.

Post-Traumatic Stress Disorder (PTSD)

- A score in the range of 51.
- Traumatic Stress Questionnaire (TSQ)
A score in the range of 7.

Diagnosis

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

1. Post-Traumatic Stress Disorder
2. Major Depressive Disorder, Mild, Single Episode

Treatment Recommendations

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

Post-Traumatic Stress Disorder (PTSD):

- Treatment for PTSD typically involves a combination of medication, therapy, and self-care techniques. Here are some necessary treatment recommendations for PTSD:
- Cognitive Behavioral Therapy (CBT): CBT is a type of talk therapy that focuses on changing negative thought patterns and behaviors that are causing distress. This therapy helps individuals to manage and overcome PTSD symptoms.
- Eye Movement Desensitization and Reprocessing (EMDR): EMDR is a specialized therapy that involves using eye movements or other types of bilateral stimulation to help individuals process traumatic experiences.
- Medication: Medications such as selective serotonin reuptake inhibitors (SSRIs) or other antidepressants may be prescribed to help manage PTSD symptoms such as depression and anxiety.
- Self-care techniques: Engaging in activities that promote relaxation and self-care, such as meditation, exercise, and healthy eating, can help individuals manage PTSD symptoms.

Major Depressive Disorder, Mild, Single Episode:

- Treatment for major depressive disorder typically involves a combination of medication, therapy, and self-care techniques. Here are some necessary treatment recommendations for mild, single episode major depressive disorder:
- Selective serotonin reuptake inhibitors (SSRIs): SSRIs are a type of antidepressant medication that can help alleviate symptoms of depression.
- Cognitive Behavioral Therapy (CBT): CBT is a type of talk therapy that focuses on changing negative thought patterns and behaviors that are causing distress. This therapy helps individuals to manage and overcome depression symptoms.
- Interpersonal Therapy (IPT): IPT is a type of therapy that focuses on improving relationships and communication skills. This therapy helps individuals to manage depression symptoms by addressing social and interpersonal issues.
- Self-care techniques: Engaging in activities that promote relaxation and self-care, such as meditation, exercise, and healthy eating, can help individuals manage depression symptoms.