

Session Information

Client:	Giffen, Todd (885246) 3/13/1985
Staff:	Unger, Ron (35)
Service Date/Time:	12/9/2013 4:00 PM - 4:59 PM
Client Program:	MH Adult Outpatient (ADULT)
Activity:	Assessment, Re-Open or Update Outside Assmt (AsmtUpdate)
Organization:	CFD North
Service Location:	11 - Office

Mental Health Assessment

Presenting problem(s):	<p>Life stressors and current symptoms</p> <p>Todd reports he would like to have a professional who knows his story and can help advocate for him, possibly help him with a legal case regarding some torture he experienced, what he believes was abuse at the Oregon state hospital. He has talked with an attorney in the Portland area, also with Jeff Johnson in town. He was in the state hospital in the past couple months, reports he has been traumatized, also would like help getting his life back together. Reports he believes people at US Dept. of Justice used some kind of a weapon against him. (Because Todd has believed he was quickly diagnosed psychotic in the past rather than listened to, and this harmed his relationship with mental health providers, no judgment will be made in this assessment regarding the truth or falsity of his reports about persecution by the government, instead that will be discussed in detail using a CBT approach, "looking at the evidence." Currently he is living at the mission, just got out of jail.</p> <p>He was 19 years old when he got arrested for harrassment and menacing, he ended up in Oregon State Hospital. Over the past ten years he thinks he has been there 4 times, once for about 4 years under PSRB. He reports problems at the hospital include being touched and hugged by a female staff person - Bonita Tucker, who then alleged he was a "stalker", also being assaulted by other people there, put in seclusion and restraint for no good reason. He thinks being misdiagnosed was one of the bad things that happened to him, and the drugs were not helpful.</p> <p>Reports he feels depressed, with little energy, trouble relaxing, and trouble concentrating, nearly every day, all of which makes it hard to get on with his life.</p>
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Biopsychosocial Information to Justify Diagnosis

Family relationships:	<p>Family make-up, quality of relationships, marriage(s), divorce(s), cultural identification</p> <p>Growing up he lived sometimes with his dad, at other times with his grandma, his aunt, his mom hed didn't know well, etc. His dad had lots of abusive girlfriends and so he would send the kids away. By age 12 he went to live with his dad's parents full time. Has 4 half siblings, 2 on each side, a brother and sister on each side, he is the oldest.</p> <p>The sister and brother on his mom's side, the ones on his dad's side he doesn't know, one sister is very successful in NC. Dad is in AZ, Mom lives in Baker City, doesn't communicate with either of them.</p> <p>He had been living with his grandpa and grandma, he got in some trouble with an assault 4 charge against him and he can't call his grandpa right now because of the legal trouble. He worries his grandpa is "in on it".</p>
Abuse/trauma:	<p>Include sexual, physical, verbal abuse, and domestic violence</p> <p>Reports abuse on and off, most often from his dad's girlfriends, like at 5 years old his dad's girlfriend would "throw him around the room." Later his dad was married to someone who favored her own children "she would put me into a diaper and lock me out of the house." Had some success in school up to 5th or 6th grade, then developed anxiety, got bullied, also pushed by teacher, by 7th grade he refused to go to school, then he did a "home school thing." Recalls some sexual abuse, for example by a 13 year old girl who got on top of him and who was pulling his clothes off, some other inappropriate stuff "it wasn't real bad." As a teen had tons of friends online, none in real life.</p>

**Possible relationship
between trauma and
current mental health
symptoms:**

He believes the childhood trauma set him up to get into more trouble later. We will explore the possibility that the childhood trauma caused him to be hypervigilant for trouble causing him to sometimes see problems as worse than they are.

Current medical issues:

Include current medications and prescriber
Reports traumatic brain injury, neuromuscular injury (maybe dystonia), he's going to a neurologist about this. Not taking any psychiatric medications currently.

Suicidal/Violent Ideation or Behaviors**Current danger to self:**

- | | | |
|--|---|---|
| <input type="checkbox"/> No current danger to self | <input type="checkbox"/> Has weapon | <input type="checkbox"/> Self mutilation or other self-harm behaviors |
| <input type="checkbox"/> Has plan | <input type="checkbox"/> Recent suicide attempt (s) | <input checked="" type="checkbox"/> Suicidal ideation |

Current danger to others:

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> No current danger to others | <input type="checkbox"/> Homicidal ideation | <input type="checkbox"/> Threat to harm others |
| <input type="checkbox"/> Has weapon | <input type="checkbox"/> Specific victim | |

Current situational dangers:

- | | | |
|---|--|---|
| <input type="checkbox"/> No current situational dangers | <input checked="" type="checkbox"/> Homelessness | <input type="checkbox"/> Recent threat of assault |
| <input type="checkbox"/> Domestic violence | | |

Comments/actions taken:

Living at the mission now. Has some thoughts about "I wish I could die" when he is really frustrated, no other suicidal thoughts, no plans.

Substance Use**Substance use
(including tobacco):**

- | | |
|--|---|
| <input checked="" type="radio"/> Individual denies current or past substance use | <input type="radio"/> Individual confirms current or past substance use |
|--|---|

Comments:

Include substance(s), number of days since last use, and frequency of use
Says he only had

Gambling**Has the individual ever
felt the need to bet
more and more money?**

- ☐ Yes
☒ No

**Has the individual ever
felt the need to lie about
their gambling?**

- ☐ Yes
☒ No

Comments:**Youth Only****Peer relationships:****School:****Developmental milestones:****Strengths:**

Mental Status Exam

CoRe Addendum Only: ☐ See AOD Assessment
for Mental Status Exam
if done in the last 3
months

Appearance:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Clothing unclean	<input type="checkbox"/> Physically unclean
	<input type="checkbox"/> Bizarre	<input type="checkbox"/> Disheveled	<input type="checkbox"/> Sickly
	<input type="checkbox"/> Clothing inappropriate to weather	<input type="checkbox"/> Obese	
Motor:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Restless	<input type="checkbox"/> Tics
	<input type="checkbox"/> Gestures	<input type="checkbox"/> Slowed	<input type="checkbox"/> Twitches
Attitude toward examiner:	<input checked="" type="checkbox"/> Cooperative	<input type="checkbox"/> Demanding	<input type="checkbox"/> Hostile
	<input type="checkbox"/> Contemptuous	<input type="checkbox"/> Evasive	<input type="checkbox"/> Seductive
	<input type="checkbox"/> Defensive	<input type="checkbox"/> Guarded	<input type="checkbox"/> Unclear
Mood:	<input type="checkbox"/> Unremarkable	<input type="checkbox"/> Depressed	<input type="checkbox"/> Irritable
	<input type="checkbox"/> Angry	<input type="checkbox"/> Dysphoric	<input type="checkbox"/> Labile
	<input checked="" type="checkbox"/> Anxious	<input type="checkbox"/> Euphoric	<input type="checkbox"/> Unclear
	<input type="checkbox"/> Apprehensive		
Affect:	<input checked="" type="checkbox"/> Normal range	<input type="checkbox"/> Flat	<input type="checkbox"/> Reduction in range
	<input type="checkbox"/> Expansive		
Appropriateness of mood/affect:	<input checked="" type="checkbox"/> Congruent with mood	<input type="checkbox"/> Incongruent with mood	<input type="checkbox"/> Unclear
Thought process:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Loose association - ideas unrelated	<input type="checkbox"/> Tangential - loses thread of thought, never returns to original point
	<input type="checkbox"/> Blocking - can't remember what was being said	<input type="checkbox"/> Perseveration - Persistent repetition of words	<input type="checkbox"/> Unclear
	<input type="checkbox"/> Circumstantial - talks about irrelevant issues, but eventually gets back to the point	<input type="checkbox"/> Racing thoughts	
Content of thought:	<input type="checkbox"/> Normal	<input type="checkbox"/> Obsessions and compulsions	<input type="checkbox"/> Suicidal ideation
	<input type="checkbox"/> Delusions	<input type="checkbox"/> Paranoia	<input checked="" type="checkbox"/> Unclear
	<input type="checkbox"/> Homicidal ideation	<input type="checkbox"/> Phobias	
Alertness:	<input checked="" type="checkbox"/> Alert	<input type="checkbox"/> Lethargic	<input type="checkbox"/> Stupor
	<input type="checkbox"/> Fugue state	<input type="checkbox"/> Not oriented	<input type="checkbox"/> Unclear
Orientation:	<input checked="" type="checkbox"/> Orientation to time, place, and person	<input type="checkbox"/> Not oriented to time	<input type="checkbox"/> Unclear
	<input type="checkbox"/> Not oriented to place		
Memory:	<input type="checkbox"/> No impairments	<input type="checkbox"/> Remote memory impaired	<input type="checkbox"/> Unclear
	<input checked="" type="checkbox"/> Recent memory impaired		
Concentration/attention:	<input type="checkbox"/> Unimpaired	<input checked="" type="checkbox"/> Impaired	<input type="checkbox"/> Unclear
Abstract thinking:	<input checked="" type="checkbox"/> Appropriate	<input type="checkbox"/> Overly abstract	<input type="checkbox"/> Unclear
	<input type="checkbox"/> Concrete		
Cognitive functioning:	<input checked="" type="checkbox"/> Average	<input type="checkbox"/> Below average	<input type="checkbox"/> Unclear
	<input checked="" type="checkbox"/> Above average		
Speech:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Lacks spontaneity	<input type="checkbox"/> Monotonous
	<input type="checkbox"/> Incoherent	<input type="checkbox"/> Loud	<input type="checkbox"/> Mumbled

Perceptual disturbances:	<input type="checkbox"/> Mute	<input type="checkbox"/> Rapid	<input type="checkbox"/> Soft spoken
	<input type="checkbox"/> Pressured	<input type="checkbox"/> Slow	<input type="checkbox"/> Whispered
	<input type="checkbox"/> Rambling	<input type="checkbox"/> Slurred	
	<input checked="" type="checkbox"/> None apparent	<input type="checkbox"/> Tactile hallucinations	<input type="checkbox"/> Visual hallucinations
	<input type="checkbox"/> Auditory hallucinations		
Judgement:	<input type="checkbox"/> Good	<input type="checkbox"/> Poor	<input checked="" type="checkbox"/> Unclear
	<input type="checkbox"/> Fair		
Reliability:	<input type="checkbox"/> Reliable	<input type="checkbox"/> Unreliable	<input checked="" type="checkbox"/> Unclear

Client DSM Diagnosis as of 12/9/2013

Client:	Giffen, Todd (885246) 3/13/1985
Date Diagnosed:	12/9/2013
Diagnosis By:	Unger, Ron (35)
External Diagnosis?	No
Description:	

Diagnostic Formulation**Axis I: Clinical Disorders**

DSM Code - Description	ICD-9 Code - Short Description	Pri/Sec	Comments
309.81 - Posttraumatic Stress Disorder	309.81 - POSTTRAUMATIC STRESS DIS	1	Chronic;

Axis II: Personality Disorders and Mental Retardation

DSM Code - Description	ICD-9 Code - Short Description	Pri/Sec	Comments
V71.09 - No Diagnosis on Axis II	V71.09 - OBSERV-MENTAL COND NEC		

Axis III: General Medical Conditions

Description	Pri/Sec
Reports he has had a brain injury & "muscular injury" due to torture by the government.	2

Axis IV: Psychosocial and Environmental Problems

Description	Severity	Comments
Problems related to the social environment	Severe	Reports no friends in town, though he gets some support from MindFreedom

Axis V: Global Assessment of Functioning Scale

Current GAF Score

41

Signatures

Signature #1: | Ron Unger (LCSW) - 12/11/2013 11:37 AM

Signature History

Action	Date	Staff
Document Signed	12/11/2013	Ron Unger (LCSW)