

NEBRASKA DEPARTMENT OF EDUCATION

Disability Determinations Section

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Determination For Social Security and Supplemental Security Income Disability

August 2, 2003

Dr. Psychologist
123 Circle Dr.
Anywhere, NE 12345

SSN: 555-55-5555
CLAIMANT: Jane Doe

Thank you for your telephone report which is included as evidence in the file of the above claimant.

Two copies are enclosed for your review.

PLEASE SIGN, REVIEW, AND RETURN A COPY OF THE REPORT

Thank you for your support.

Edna Examiner

1240/Job #3727

Transcribed Telephone Report

Dictated: August 2, 2003

DATE: August 2, 2008
SSN: 555-55-5555
CLAIMANT: Jane Doe
DOB: 01/01/1901
EXAMINER: Edna Examiner

Dr. Psychologist
123 Circle Dr.
Anywhere, NE 12345

PSYCHOLOGICAL REPORT

DATE OF EXAMINATION:

August 2, 2008

GENERAL OBSERVATIONS:

Jane Doe is a 48-year-old, married but separated, Caucasian female resident of Anytown, Nebraska, who drove herself unaccompanied to this interview from her home approximately 10 miles away. She arrived about 15 minutes late, apparently due to her watch being slow. She is about 5 feet 9 inches tall and weighs approximately 145 pounds, also reporting a 12-pound weight loss over the past 2 weeks. Hygiene and grooming were adequate. She was dressed in blue jeans and a sleeveless top. She was wearing a blue Denim visor over blonde hair. She has blue eyes. Her skin was relatively tanned. She reported having breaking out a rash in the last few days or so but showed me one small oval patch of irritation on her right shin line. She stated that she was feeling well but did not really know why other than having a rash. There were no adaptive devices in place. She was oriented in all spheres. She demonstrated an adequate understanding of the nature and purpose of the interview. She was cooperative with the interview process and attempted to answer questions freely and openly. The information in this evaluation is based on the clinical interview on administration of the mental status exam. There were no medical records provided.

PERSONAL AND FAMILY HISTORY:

SOCIAL HISTORY:

The claimant lives with her 2 children that include a 8-year-old daughter (Ashton) and a 1-1/2-year-old son

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The claimant reported of having separated from her husband on April 15, 2003, after approximately 3 years of marriage. She described her husband as verbally abusive of her, and then reported that he had pushed her down and choked at her and threatened to kill her the night that she kicked him out of the house. Her 2 children are the products of a previous relationship.

The claimant grew up in Anywhere, Nebraska, the middle of 8 siblings. She has a brother aged 50 and a younger sister aged 27. She described her biological father as extremely violent and has having engaged in a great of physical abuse of her mother and the family. Essentially, she has had a family life "sucked." She was sexually abused in the 9th grade by a family friend. When she disclosed this to her parents, her father "stood by" the friend even though the same person had been previously convicted of sexual abuse of his own niece. She stated that her mother believed her and went to the police with this man's wife. The perpetrator was convicted of the charge and served one year. She reported that her father refused to speak to her for an extended period of time after that. She described him as never having been there for her and stated that he attributed lot of his behavior to abuse by his own parents. The claimant reported that the only time she had her father tell her that he loved to tell her that he loved her was after her daughter was born. However the relationship went back to "normal" after that.

The claimant reports that she has a couple of female friends who she described as essentially being like "sisters" to her. Otherwise, she appears to have some limited social support, although she apparently gets along relatively well with her landlord. She stated that she has preferred jobs in the past that did not involve working around people for the most part.

EDUCATIONAL/OCCUPATIONAL HISTORY:

The claimant states that she is a high school graduate who completed 1 year at Anywhere Community College. She was forced to quit her education when she became pregnant and was required to get a full-time job.

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Her jobs have included working as a waitress and at McDonald's in the high school. She exhibits that she had very much enjoyed working in the bar for about 6 months and might have retained that job "if the same people were still there." As noted above, she has reported that most of the jobs are in places "where I don't have to be around people." Her most recent job was as a worker at a grocery store (Co-op), which she stated she was forced to quit when "they basically told me to choose between my children and the job." At present, she is employed a few hours a week, taking care of animals on a freelance basis.

MEDICAL HISTORY:

The claimant received medical care through John Doe, ARNP, of Anywhere Community Service. She reports no current medical diagnosis or a history of acute medical illness or injury. She has had a couple of pregnancies. The other medications that she is taking at present include over-the-counter vitamins and "PMS pills."

PSYCHIATRIC HISTORY:

The claimant has had no formal psychiatric diagnosis or treatment but states that she is treated through Anywhere Community Services by her primary care provider for a bipolar disorder for which she was apparently prescribed Zoloft a year ago. She has had no formal diagnostic workup by a psychologist or a psychiatrist and has not been on a mood stabilizer. She is currently receiving no psychiatric treatments and is on no psychotropic medications. She stopped taking the Zoloft when she became pregnant. She stated that she now cannot afford the prescription but would otherwise take it at the present time. Her only extensive counseling was in marital counseling with John Smith, RN, HP, about 1-1/2 years ago. She and her husband had few sessions with her husband that the claimant told was initially hopeful in the marriage but the marriage ultimately ended in the aforementioned separation.

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SUBSTANCE ABUSE HISTORY:

Abuse of alcohol and use of illegal substances, as well as abuse of prescription of non-prescription medications were denied.

LEGAL HISTORY:

The claimant reports that she is considering a lawsuit stemming from what she described as a false allegation or charge by a Anywhere Police Officer, of animal cruelty made against her. The claimant reports that she was "wrongly accused" by the officer because "he does not like me. He never has," stating that she had a number of testimonials from others, including her landlord regarding the current wrongful charge. Ms. Doe reported that she was working with a local veterinarian who was supporting her efforts to get her animals back. She stated that she had kept strays and other dogs that were unable or were in line to go to Humane Society. She reported that her van had been broken and she had been forced to stay at her mothers but was going to a home where the animals were, every other day, and was also taking care of her garden, the beauty and care of what she felt it is an example of evidence that she was actually there to care of the animals.

HISTORY OF PRESENT ILLNESS:

Of note, the claimant has no formal psychiatric or psychological diagnosis made but is being treated by her primary care practitioner who apparently made the diagnosis of bipolar a couple of years ago and began treating her with Zoloft. She has never taken a mood stabilizer and as noted above is not on any psychotropic medications at present. There have been no hospitalizations. It does appear that the claimant attributes her mood disorder symptoms to the difficulties she has had in maintaining employment. She states that she has been let go or fired from several jobs where she has had difficulties recently due to irritation and moodiness. She reports that she gets easily upset in private situations, but has not made any public scenes or been involved in any rancorous fights. She does report that her moods have gone up and down with

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moods ranging from 2 to 8 on a scale of 1 low and 10 high over the past month. Her mood wanders as low as a 2 in response to her friends letting her know what her husband was doing with his current girlfriend and her discovery that he was introducing the girlfriend to their children. She also reported that she had become very upset upon finding out that her husband's "girlfriend is psycho, and she tried to take my daughter. That is the reason I cannot sleep at night." Ms. Doe has reported sleep disturbance including being unable to sleep more than 2 or 3 hours at a time and at times when she is not able to sleep. She reported being up for about 4 days with no more than 2 hours sleep over total after her husband left in April 2005. She reports loss of appetite with a 12-pound weight loss. She has reported that her energy level is very high and stated that last week "I cleaned my area from top to bottom in about 4 hours and what should have taken me about 4 months." She has reported some paranoid ideations, feeling as though "somebody is always watching me," but without particular reason, although she then later added she thought that her husband might be trying to take the children and she was extra alert as a result of that concern. She does report the concern as being having difficulty working out conflicts with others and some disrupted relationships on the job to which people in the community (such as with Police Officer she dealt earlier).

BEHAVIORAL OBSERVATIONS:

The claimant presented as described in the introductory session. She was open and cooperative. Intellectual capacity appears to be approximately in the average to low average range. Speech is clear and coherent, is somewhat pressured, was spontaneous and elaborated. Conversation was conjunctional at times but relatively goal directed and she tracked adequately in answering questions. Auditory and visual hallucinations were denied. There were no overt impairment indicative of a thought disorder. There were no bizarre or unusual pre-occupations. Paranoid ideations appeared to be limited to choose specific conflicts and fears of her husband's abducting or otherwise taking her children from her. She described her mood at present as

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5/6 on a scale of 1 low and 10 high. She denied history of suicidal ideation both past and present. She denied homicidal ideation. Generally speaking, she has no indications of intentions to harm herself or others or any self-mutilation behavior. Symptoms of an eating disorder were denied. She appeared to be struggling with some wide mood fluctuation and some anxiety or easy irritation, but did not subjectively identify any symptoms of panic attacks or pervasive anxiety.

MENTAL STATUS EXAMINATION:

She was oriented in all spheres. She was correct for 3 out of 3 objects, both on immediate and delayed recall. She was unable to calculate serial 7s essentially stating that she could not do it because she "hated math!" She was able to spell the word 'World' correctly backwards. She answered questions and judgment in reasoning adequately. She was able to adequately describe simple proverbs but tended to describe more complex proverbs somewhat concretely. She reported that she does not have a check-in account because she and her husband got into debts based on his mishandling of their finances and having overdrawn on accounts. She indicated she has had no problems with excessive spending or writing bad checks.

CURRENT ADAPTIVE FUNCTIONING (BASED ON _____):

The claimant states that she spends her typical day getting up in the morning, getting her children ready, and then going to turn her horses. She reports doing some house work and taking care of her children, but reported that lately she had been refusing to help out her mother (with whom she is staying) on the basis that her 14-year-old sister "takes no responsibility and just sits around." Generally speaking, there does not appear to be any restrictions in terms of activities of daily living. She is able to perform her own hygiene tasks adequately.

Relative to social functioning, the claimant appears to have a number of difficulties in dealing with conflicts in social situations and is likely to be easily drawn into intense conflicts, rigid stances, and have difficulties in

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making compromises that would lead to a resolution. She has reported having a couple of friends that she is very close to, and appears to have simple relationships with her landlord and several other people, but appears to be easily drawn into conflicts with others overall. She describes conflicts with the local Police Officer, an inability to resolve conflicts on the job with her employees and co-workers leading to her quitting, and appears to take a strong rigid stand with others (such as her description of her 85-year-old sister).

Relative to stress tolerance, the claimant indicates a certain amount of adaptive flexibility relative to handling day-to-day situations. She does, however, appear to live a crisis-oriented lifestyle with a great deal of disruption centering around loss of jobs, conflicts with authorities, family conflicts, and the aforementioned charge of animal cruelty which appeared to have been something that she may have otherwise resolved effectively if she were in a more stable frame of mind, and were more attentive to social cues.

The claimant's capacity for simple span of attention appears to be adequate but I predict that she would become disrupted by conflict or being presented with sudden problems that she is otherwise unprepared for. In no situation, she is likely to lose concentration and respond hastily and inefficiently.

The claimant can carry out short and simple instructions under ordinary supervision based on her ability to follow the 3-step directives in this evaluation, but similar to paragraph above, I believe that she may be unraveled when she is angry, upset, feels threatened, or is otherwise in a conflict.

Her ability to relate appropriately to co-workers, and supervisors is limited as already mentioned. She has a number of conflicts with others including conflicts on the job as mentioned earlier. It appears that many of these conflicts could be resolved adequately if she had better adaptive flexibility in working things out with people.

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The claimant appears to have some resources for dealing with disappointments and loss in her life and making changes (such as moving out to her mother's house), but she, as noted earlier, appears to be crisis-oriented type of person who introduces and lives with a great deal of day-to-day chaos and disruption. She appears capable of finding better place to live and taking care of her children basically, but is likely to have difficulty making the adaptations needed to make a more careful and involved commitment through everyday relationships.

FORMULATION/PROGNOSIS :

This claimant does appear to have symptoms of a mood disorder but I am not finding episodes of a tweak of manic episodes. Her reaction to her husband leaving in April 2007 does sound somewhat hypomanic but is likely a function of a intense stress undergoing a sudden separation and the resulting emotional disruption and chaos. The claimant does have some mood irritability or inflexibility with others that suggest aspects of mood instability. It is possible that a likely diagnostic consideration is a bipolar type II disorder. She does not appear to be acutely depressed. To some degree, her reactions are situational and some from the case in which she is involved, but her mood disorder symptoms also contribute to the chaos and the other problems already mentioned in the first place. She reports mood fluctuation with a permanent irritability as well as sleep disturbance and episodes of high energy. For these reasons, I am considering a bipolar type II disorder. The claimant is not receiving any current psychiatric treatments and has not undergone a formal diagnosis. It would be most appropriate for her to undergo a full psychological or psychiatric evaluation to verify the diagnosis and make treatment recommendations specific to her symptoms on presentation. She also could use medication management and it appears that it would be most appropriate for her to see a psychiatrist for medication management consultation.

DIAGNOSTIC FORMULATION:

Axis I Bipolar disorder, type II, rule out mood disorder, not otherwise specified.

Axis II Deferred.

Axis III No diagnosis.

Axis IV High conflict marital separation, legal problems, problems with primary support group.

Axis V Adaptive functioning of Global Assessment of Functioning score - 50.

ABILITY TO MANAGE FUNDS:

This claimant appears capable of managing her own funds.

Sally Psychologist, Psy.D.
Licensed Psychologist

This transcription was made from a recording of the voice of Dr. Psychologist, Psy.D., on August 2, 2003.

1240/Job #3727