

January 17, 2023

Medical Summary Report

Re: Mr. James
DOB: 55.55.5555
SS no: 555.55.5555

Dear DDS Examiner:

Introduction

Mr. James is a 37-year-old, chronically homeless male. He currently lives in a Homeless Veteran Program at a local social service agency working on “my homelessness and my mental ill stuff.” Mr. James has experienced homelessness and lengthy incarcerations for most of his adult life. He also has a history of being treated for his mental health condition dating back to when he was a child; however, those records were not obtained. Mr. James has a history of being diagnosed with an Axis I diagnosis of Schizoaffective Disorder, Schizophrenia Paranoid Type, Post Traumatic Stress Disorder, and Mood Disorder. He has a history of non-adherence to treatment when out of the structured environment of the prison. However, now that he is in a structured program, he has been receiving consistent treatment for his mental health concerns.

Mr. James is 5 feet 8 inches and is 156 pounds and presents disheveled wearing sweatpants, a long sleeve plaid button up shirt and big steel-toed boots. He lacks the ability to care for his hygiene, as he is malodorous on most encounters. On the initial encounter he had long unkempt hair and a full beard that was matted, however he recently trimmed both “because they [staff at the program] nicely asked me to.” He states, “I don’t shave much cause I don’t like people to know who I am.” Mr. James is quiet and flat while making limited contact. He has an obvious mouth tick where his mouth will open wide; he will take a deep breath and will stutter when attempting to speak.

It is difficult to gather accurate information from Mr. James due to his psychosis. When asked about his ability to work, he states:

I was fine until they would treat me like I was slow and stupid. I’m not stupid, I am much smarter than they think...I do see flashing lights, like I'm getting a migraine but there’s no headache...This voice tells me to hurt people all the time, not to trust people. I have to take advantage of people before they take advantage of me...See, I have friends who are wizards and one who is a sorcerer, they do help protect me. We would get together and summoned demons. We would do Pentagram on the ground with salt, just to make sure the demon wouldn't harm us. Many demons are dangerous. See, the upper class demons throw energy balls that are so dangerous. Some throw fire. See, demons exist in several lights. I know the names of several demons...I have nervous paranoid. That is where people are out to get me and I will have the violent tendencies without the medications. See I started smoking cigarettes when I was 9 [years old] that might have something to do with it...The major mood swings are bad. I can either be real creative or be real down in the dumps.

Mr. James' symptoms include bizarre and paranoid delusions, religious preoccupation, auditory hallucinations, disorganized and illogical thought patterns, tangential speech, suspicious and blunted affect; lack of insight, aggressive and irritable mood swings, constant isolation, severe nervousness and anxiety in social situations, and difficulty concentrating and focusing.

Mr. James' mental health symptoms have caused significant limitations in all areas of functioning. These impairments have had a direct affect on his ability to maintain stable employment and housing when out of prison.

Personal History

Mr. James was born in Anytown, YY to his biological mother and father, who then put him up for adoption when he was 2 months old. He explains that his biological parents told the adoption agency that they "couldn't afford me." When asked about his childhood, he states, "When I turned 12 [years old] they put me in the hospital for manic depressive syndrome. Up until I was 8 or 9 [years old] it was mostly pretty good. We were remodeling and I wanted to help but they wouldn't let me. I was emotionally and verbally abused. When I was 10 [years old] my adoptive mom remarried and when I was 12 [years old] I chased her new husband with a two-tine meat fork, we were in an argument about my alarm clock and I felt he was calling me liar...My first dad was a really strict man. If you did it the first time, you got a warning. Second time, you got a spanking, if you were stupid enough to do it a third time he spanked us so hard we couldn't sit down for a week. My adoptive brother went to school and the teacher asked him to sit down, and he told her that my father wants us to stand for a week after the last spanking. We became ward of the state." It seems as if Mr. James only remembers bits and pieces of his history, however he did try his best to give this writer as many details as possible. Dr. Lime states, "He has a long history of psychosis. He began to hallucinate at the age of 12. He began to 'bang' his head and cut himself at around that age. He was very withdrawn and unhappy as a child. He continued to have hallucinations throughout his lifetime. He described paranoia."

Educational History

Mr. James completed the 9th grade in school and obtained a GED when he was in a mental health hospital in 1992. He states, "I was going from hospital to hospital and taking that GED was a way into the Army. I dropped out in the 10th grade 'cause I was in the hospital all the time and I was in special classes. I was a juvenile offender and they erased all my charges when I went into the Army. I got lucky I guess."

Employment History

Mr. James last worked May 2005 at The Market. He reports doing well there until "they would treat me like I was slow and stupid. I cooked and was a clerk there. I was homeless out there, but they still let me work there. I violated and went back [to prison]." Before working at The Market, Mr. James reports working at restaurants and "day labor places doing different things. I was a dishwasher and would clean convention centers and stuff. I'll tell ya, I was a good worker, but I was a little slower than other people." He describes his ability to get along with co-workers and bosses as "hard for me 'cause I like work alone. People are always in your space."

Military Service History

Mr. James enlisted in the Army in 1994 “so I could get out of all that trouble. I went AWOL for almost a year. I had heard through the grapevine that my sergeant wanted to send me to the restricted site camp. They weren’t too concerned. I saw the psychiatrist. They were giving me hassles and talking of Chapter 10; they discharged me in lieu of the court-martial.” Mr. James explains that he is considered “other than honorable” discharge from the Army.

Relationship History

Mr. James has never been married and states, “I might have children. I slept with a lady in ’98 and my friends told me they saw her walkin’ around town with a baby that looked like me. I tried to see, but my fiancé told me that she would be gone if I tried.”

Mental Status Exam

Dr. Kathy Lime performed a current Mental Status Exam (MSE) with Mr. James on 6.13.2012. Dr. Lime states in her functional assessment, “Mr. James is currently unable to care for all but the most basic ADLs. He cannot make decisions. He does not care for hygiene and cannot manage money or medications. He cannot travel independently now. He must be supervised for his social behavior. He has severe stress. He has severe and profound problems with stress. He cannot focus or concentrate. His memory is functionally impaired.” In her observation, she states, “He was interviewed at the homeless shelter where he is in a supervised program. He presented as a disheveled and extremely unkempt...His hair was not combed. He wore messy soiled clothing. He rocked throughout the interview. He often stared blankly into space. He was guarded and has severe problems with insight which limited his self-report. He seemed severely depressed and jittery. He also had a very low energy level...He appeared to be having thought disorder during the interview.” Dr. Lime diagnosed him with an Axis I diagnosis of Schizoaffective Disorder-active and severe, and PTSD severe.

Medical Records

Mr. James has been treated for his mental health condition since he was a teenager and in foster care, however these records have not been obtained. He has been in outpatient treatment through Mental Health Services; however, these records have not yet been obtained. He has prison records dating back to 2005, which will be summarized. He has had a couple outpatient visits with Mental Health Center, however he discontinued treatment after two sessions.

Prison Records

On 6.13.2005 Mr. James was arrested and began treatment for his mental illness in the Department of Corrections. Initially he was diagnosed with Schizophrenia, Paranoid Type and treated by Stewart Wilson, APRN. At this time, he was placed on Risperdal 2 mg and Cogentin .5mg. Records state, “very paranoid and hears voices telling him not to trust anyone.” Mr. James was released on Community Corrections, however violated his parole and was placed back into Department of Corrections. He was admitted to the Special Needs Prison on 7.17.2007, where Dr. Glenn Vance treated him and diagnosed him with an Axis I diagnosis of Schizoaffective Disorder, and PTSD. Dr. Vance treated him with Risperdal 4mg and Cogentin 1mg. On 4.27.2009 he was discharged from the Special Needs Prison to the main Correctional Complex where he served the remainder of his time. He was released from prison on December 8, 2011, to homelessness. He was released with a month supply of medication and set up with an outpatient mental health appointment at Mental Health Center. These records will be summarized below.

Outpatient Mental Health Records

Mental Health Center

On 3.20.2012 Mr. James had his initial intake with Mental Health Center. Records state, "Was raped in prison 2 times. Was in special needs for treatment program. Stays at the city shelter...Nightmares about prison. Dreamed about stabbing people so they would leave him alone...Flashbacks about molestations he went through as a child and the crime he committed. Thinks he should have been more violent, would have been left alone. Anger is off the scale - more violent than what is called for. Voices - some sound young and some sound old...Must wear anklet until 2015. Trouble keeping battery charged at the shelter." Mr. James was diagnosed with an Axis I diagnosis of Mood Disorder NOS and PTSD.

On 4.4.2012 Mr. James presented to Mental Health Center for his initial counseling session. Records state, "Reluctant to discuss circumstances which lead to his incarceration...Reports he was in a troubled relationship for several years. He reports he sought treatment at a local mental health clinic, but girlfriend sabotaged treatment telling him he did not need it...Client harassed in prison by cellmates who extorted money and took his meds...Client is reluctant to discuss symptoms. Requested that we end the session early."

Mr. James did not return back to Mental Health Center after the Therapy appointment.

Mental Health Services - Downtown Clinic

Mr. James is currently receiving outpatient treatment with the Downtown Clinic. He will see a different provider each time he goes, however they are consistent with treating him with Haldol 5mg and Cogentin 1mg. They have him diagnosed with an Axis I diagnosis of Psychosis NOS and have ruled out Schizoaffective Disorder and Post Traumatic Stress Disorder. These records have not yet been obtained by this writer.

Functional Information

Mr. James displays significant impairments in all areas of functioning, due to the symptoms of his mental illness, specifically his paranoid thoughts, auditory hallucinations and severe delusions, Mr. James has been unable to maintain stable employment and housing since being released from prison.

Understand, Remember, or Apply Information:

Due to Mr. James' continued struggle with concentration due to intrusive thoughts and severe paranoia, he has difficulty remembering and applying information that is provided. As stated by Dr. Lime, "He struggled with memory and/or concentration on serial and memory tasks on the MSE." Dr. Lime also reports that Mr. James "seems to lack insight about his issues or his daily living skills. He requires assistance with decisions."

Interact with Others

Mr. James does not have contact with anyone in his family and reports last speaking to someone in his family in 1996. He states, "He made me the black sheep when I got discharged from the Army." When this writer asked if he has any close friends, he states, "I have four close friends that I hang with. They are all special like me. We get along and protect each other. The wizard

really protects me.” When this writer asked him if he likes to avoid people, he states, “I have to because they are mean to me. In prison I was treated real bad. They kept me in the cell all the times because they did bad things to me there.” He did not want to go into detail about those experiences; however, this writer read in medical records that Mr. James was “raped two times while in prison.” Mr. James is often times alone at the program and says this is “because I don’t want these people knowing who I am. They will just hurt me. I go to groups. I sometimes talk there, but not really, ‘cause they don’t have the same problems as me. They won’t understand my magical ways.” Dr. Lime states, “He has profound impairments in social functioning. His friends are the ‘demons and wizards’ who keep him safe from other evil forces. He likes to research and study various religions. He has no friends other than the imaginary ones. He has never had a normal dating life. He is estranged from his family...His overall presentation is odd and would alarm co-workers and the public in general. He displays an inability to monitor his presentation during an interview. This would be a problem at most jobs. He has and displays significant anxiety. He was sexually abused as a child and sexually assaulted twice while in prison. This has led to even more anger and anxiety.”

Due to the symptoms that he experiences from his mental illness, Mr. James’ interactions with others is very limited.

Concentrate, Persist or Maintain Pace

Mr. James has difficulty with focus and concentration at times, “because I have to keep up with my mind. Things come and go and I forget about everything.” When asked about his memory, he states, “I was fixing to have a nervous breakdown. I was reading and everything went down. I forgot about everything. I have to remove the wood from the fire before I get violent. I can remember to take my meds. Sometimes I forget to take them before I eat like I’m supposed to.” Dr. Lime states, “He cannot focus or concentrate. His memory is functionally impaired...He struggled with memory and/or concentration on serial and memory tasks on the MSE.”

As further evidence of Mr. James’ struggle with maintaining pace, when discussing difficulties with maintaining employment he reports, “I’ll tell ya, I was a good worker, but I was a little slower than other people.”

Due to the symptoms he experiences from his mental illness, Mr. James is often preoccupied with his own thoughts, making it difficult to concentrate and maintain pace persistently.

Adapt or Manage Oneself

Mr. James is currently living in a Homeless Veteran Program at a local social service agency where he is working on developing life skills that he can use one day in his own independent housing. He describes it as a “great program. I need it ‘cause I need help to not go back to prison. I don’t want to get into trouble anymore.” When asked about his ability to complete chores at the program, he states, “I can cook. I forget I’m cookin’ sometimes ‘cause I got to keep up with my thoughts, but I’m good at what I know. Something quick so I don’t wander off and forget. I’m afraid I will screw it up if it’s something new.” When asked about how he is with budgeting money, he states, “I’m not bad actually. In prison they would pay us \$25.00 a month and I managed it pretty good. No real big money, but I guess I could learn just like I did in prison.” Dr. Lime states, “He lives at a shelter in a supervised program. He does not manage hygiene

activities. He is disheveled and dirty most of the time. He doesn't comb his hair. He is blank and depressed. Other times he is anxious. He seems to lack insight about his issues or his daily living skills. He requires assistance with decisions."

Mr. James does not currently take care of any other people or pets. Mr. James can bathe, dress, and use the toilet on his own. When asked how often he bathes, he states in a quiet but tangential manner, "I try to shower every day. Being in the Army really taught me how to stay clean and germ-free. I knew how to do military style bed. See, I stay in the same clothes and go four or five days without a shower most times."

Due to the symptoms that he experiences from his mental illness, Mr. James displays significant limitations in adapting and managing self-care.

Conclusion

Mr. James is a 37-year-old single, Caucasian, chronically homeless male. Mr. James has been diagnosed with an Axis I diagnosis of Schizoaffective Disorder, Schizophrenia Paranoid Type, Post Traumatic Stress Disorder, and Mood Disorder. Mr. James' symptoms include bizarre and paranoid delusions, religious preoccupation, auditory hallucinations, disorganized and illogical thought patterns, tangential speech, suspicious and blunted affect; lack of insight, aggressive and irritable mood swings, constant isolation, severe nervousness and anxiety in social situations, and difficulty concentrating and focusing. These impairments have had a direct affect on his ability to maintain stable employment and housing while out of prison. If he were to be approved for benefits, it is this writer's opinion that he would require a representative payee to manage his funds.

If you have any questions, please contact Mary Smith at 111-111-1111 or Dr. Kathy Lime at 222-222-2222.

Sincerely,

Mary Smith
SSI/SSDI Homeless Outreach Project

Dr. Kathy Lime
Consulting Psychologist