

PSYCHIATRIC EVALUATION

Date: 9/11/92 Written  
Dictated

Patient Name: Ann Lockett  
Medical Record #

DR. DEVAQHARTUNI 09/11/92

I PRESENTING COMPLAINTS OR PROBLEMS

Patient is a 17 year old Caucasian female who was brought in by her mother for evaluation of her depression, acting out behavior and substance abuse.

II DESCRIPTION OF PRESENT ILLNESS

Patient reports that as she has been unhappy all her life and has getting worse in the last few weeks. She also reported that she has tried to kill herself two weeks prior to hospitalization because of her feelings of depression and unhappiness. She reports that she is always unhappy and irritable with increased social isolation and decreased interest in activities. She also complaints of decreased motivation with feeling of tiredness throughout the day, has some mood variation, feelings of hopelessness and worthlessness are predominant in her thinking pattern and feels that she is worth nothing and that she is better off dead. She also reports total lack of communication at home where she lives with her mom and dad, says her mom is preoccupied with the care of her dad who is an alcoholic and also has emphysema. She reports using drugs and alcohol every day. Reports no obsessive compulsive features, panic attacks, no psychosis.

III PAST HISTORY

Patient has been in school counseling and groups for last few weeks or month and it has not been helping her.

States she has been using alcohol for the last few years and PCP, amphetamines, acid and marijuana for the last few years, the last time two days prior to her hospitalization.

Has an older sister who is 20 years old, married and moved out, has a father with history of alcohol abuse and emphysema and a mom who works as a teacher.

States she has few friends at school. Was in trouble with decreased performance at school, increased absenteeism, involved in illegal activities and getting into trouble at school all the time

IV MEDICAL HISTORY AND CURRENT MEDICAL STATUS

Non-contributory

V MENTAL STATUS:

Patient is alert, oriented, cooperative Caucasian teenager who is moderately groomed and hygienic with poor eye contact. Motor behavior is mildly hyperactive; affect constricted in range with increased intensity, was stable, related, non-reactive; mood is dysphoric and irritable at times. Speech was normal; no formal thought disorders, was goal directed, had suicidal ideations at the time of admission. No delusions, perception disturbances, first rank signs, has poor insight into her abuse and behavior and has poor judgement about her suicidal behavior.