Amy: Overall, your analysis of this patient seems very thorough. Please review the comments and track changes below. If I pointed something out once, you’ll need to review the rest of the paper for similar mistakes. If you have any questions, feel free to email me! - Shannon

Intake Assessment Report

Client Name: Helen
Interviewer: Amy Smith
Date of Interview: 4/12/2015
Date of Report: 4/15/2015

Chief Complaint:
“I’m just tired, but at the same time, I just think, all these thoughts are in my head and I can’t fall asleep. Work is on my mind all the time, work texts me, they constantly need me. I really don’t have time to be here, and I just have to do everything. I am tired all the time, there are times when I’m not tired. I stay up all night and come 2:00 am and I’m awake not tired anymore. There’s so much to do. Sometimes I am at work 48 hours straight. I try to spend time in the office to delegate lists and make lists, but I always have to redo the work that they do. I have to do everything, the cash register, stock the shelves, change price changes, help customers on the sales floor, I have to work so much, like 80 hours a week.”

History of Chief Complaint:
Helen is a 30-year-old White female who is a store manager at CVS. She has been promoted in the last couple of months to a new CVS store. It is a new location and is understaffed, 2 workers per shift. Helen reports she has to do everything, including having to redo the staff work as well. Her store is open from 7 am to 10:30 pm. There is not enough money in the payroll to hire more staff, so she has to make sure everything is done. Helen is making lists for herself and her coworkers, attempting to delegate out work to her coworkers. However, their work is sloppy, disorganized, and does not meet her specific standards. Each of the lists includes at least 25 items which also have sub lists with 5 or more steps for each. She reports her coworkers place price tags crooked and she had to redo all of the price tags. She also reports, coworkers are putting stock in the wrong places, in the wrong aisle, or shelf and she has to redo the stocking to make it perfect. Helen reports Bridget, the district manager, counts on Helen to maintain a standard of perfection. Once Helen redoes her coworker’s tasks, it is acceptable. Helen reports her coworkers are lazy and never meet her standards of work, therefore, she needs to work overnight, up to 48 hours, to complete the work to her standards. Prior to her managerial position, in sales, she often worked long hours as well. Helen had to redo her coworker’s tasks in her previous jobs. However, at this new store, she has to work overnight as well; her best work is done at night time when no one interrupts her. During the day the store is busy and she has to do scheduling, payroll, stocking, cashier, review profit sheets, review and prepare for meetings, and prepare a twenty page assessment ready for a meeting. Helen reports her district manager, Bridget, doesn’t care about her, just about the store numbers. Bridget comes in and reviews the store and

Commented [BS1]: Not sure if you have formatting requirements from your instructor, but if you are going to single space the assignment, be sure to put a blank line in between sections to help break it up.

Commented [BS2]: do not capitalize

Commented [BS3]: APA style indicates spelling out numbers under 10

Commented [BS4]: redundant

Commented [BS5]: Are they her co-workers? Is there a better word?

Commented [BS6]: no comma here – the word “that” makes more sense

Commented [BS7]: before her managerial position in sales, or she worked in sales before the managerial position? Can you think of a clearer way to phrase?

Commented [BS8]: redundant

Commented [BS9]: she has to “do cashier” – how can you say this better?

Commented [BS10]: only spell out numbers under 10
doesn’t explain her expectations. Helen reports to be able to meet Bridget’s standards and sometimes not. Helen does more each time to exceed what she thinks Bridget’s standards are, include working overnight, and devoting all of her time to work. Helen is unsure of the criteria expected of her district manager. Helen reports she just does more to try to meet the standard for the “perfect store.” Helen works, she just goes to work and doesn’t know what coping means in regards to work. She just keeps working.

Other Clinical Issues:
Helen denied current drug and alcohol use, phobias, panic, and trauma of all types, delusions, dissociative periods, auditory and visual hallucinations, binge eating, calorie restriction, over-exercising, and outbursts.
Helen reports having unexplained abdomen pain, however, does not have time in regards to see a doctor.
Helen also reports she worries about both current and future work, and cannot stop worrying about all aspects of work.
Helen also reports drinking 2 cups of coffee, several energy drinks and caffeinated soda throughout the day to help her to “get going”.
Helen reports going 48 hours without sleep, she will sleep for 5 hours, and she feels tired. She gets up and has a cup or two of coffee, yogurt, and caffeinated drinks salad. Helen is too busy working, it’s too hard to make time to make or eat dinner.
Psychiatric Treatment History:
Helen reports no prior psychiatric treatment.
Medical History:
Helen reports having good health, denies any chronic medical health issues, medications, or allergies. However, she does report that “someday” she will visit the doctor, to check on an ongoing stomach ache for the last couple of months. She points to her lower abdomen hurting every day, but does not know why she has the pain, so she disregards the pain. Helen reports taking no over the counter medication for relief, and continues to work despite the continual pain.
Legal History:
Helen reports no legal history, including incarcerations or arrests.
Family Situation and History:
Helen reports she “work, work, work, works” and has no life outside of work. Helen denies having favorite things in her home, it’s just a place to sleep. Helen denies having close friendships, “no family too much of a responsibility”. Helen lives with her husband, is David, and three Rottweiler dogs. David and Helen have been together for 10 years, married for 5. Helen reports David is supportive, and takes care of the home and dogs. Helen reports David puts up with her personality, thinks she is a hard worker, and knows she tries really hard to strive to be “the best” or “perfect.” Helen and David are alike and have similar feelings about working hard. Helen reports, David does not work the long hours like she does. Helen and her husband met at work, he was her supervisor. They were attracted to each other because she was his best worker and he depended on her to get the work done. They were worried about being coworkers and dating, so he moved to a different retail position at Aldi’s. Helen reports he has a different job and more workers to maintain his store, which explains why she has to work such long hours compared to David. David has suggested she come and talk to someone about working so much. Helen reports seeing little of her parents or brother Jr., not having time due to work.
obligations. During Helen’s childhood, her mother took her brother shopping and forgot to take her. Helen reports having felt invisible, and forgotten often throughout her childhood. Helen worked in her notebook, in her room when she felt forgotten. During school age, Helen struggled with writing, preoccupied with perfection in how her writing looked. She reported rewriting notes for school on a regular basis.

Social/Sexual History:
Helen reports having no life outside work. She is married and has three dogs. Helen denies having time for friends and reports that “family is too much responsibility; she only has time for work.” Helen reports “not really” having friends throughout her childhood, feeling invisible.

Education/Employment:
Helen completed her BA and MBA from Pitt. During school she played volleyball, she did have trouble getting her work done because she had difficulty keeping up with notes. Helen reports rewriting notes during her BA, and missing classes because of her need to work during her MBA. Both degrees suffered because of preoccupation to meet her own standards in appearance of her notes and/or work. Helen reports during each retail work experience she has always had long work hours, and had significantly high standards to meet.

Developmental History:
Helen reported nothing was “unusual” about her development.

Mental Status Examination and Impressions:
Helen appeared well groomed for the interview. Helen’s facial expressions appeared anxious and distressed due to work related worries. She was resistant to answering questions, restless, and wanting to leave for work. Helen disrupted the interview numerous times to remark she should be at work and took one call from a coworker. Helen stood and paced several times during the session. Helen’s voice was high in pitch and rapid when she talked about work, and slow and quite when she talked about her childhood. Her rhythm of speech was fast, having intense, long explanations of her worries without pauses, requiring deep breaths to catch her breath. Helen displayed nor reported any mood lability. Her mood and affect remained congruent in context to her reports. Helen was perseverative when talking about work, the things she had to do at work, how her coworkers are not meeting her standards, and having to work long hours.
Helen denied suicidal and homicidal ideation. Helen showed no insight about excessive caffeine, or preoccupation of work related thoughts. Helen scored 21/30 on the Folstein MMSE, showing mild impairment due to stress. Helen was unable to identify the day, and the name of the clinic. Helen demonstrated memory impairment; unable to repeat ball, flag, tree. She also was unable to recall ball, flag, tree later when asked. When asked to write a sentence, she wrote a long to do list, including 8 items she needed to do for work.

Religion/Spirituality:
The client was not assessed

Lethality Risk:
Helen did not demonstrate or report current or past self-harm, suicidal or homicidal ideation.

Strengths:
Helen is devoted, self-motivated and actively asserting herself at work. She has set high
expectations for herself and is willing to go to great lengths to attain these standards. Helen is articulate in her ideas, and responded to her husband’s request to seek treatment. Helen’s food choices are healthy including salad and yogurt.

**Formulation:**

Helen’s chief complaint is reported as being tired, yet preoccupied with thoughts which keep her stimulated and thinking about work. In addition, she reports drinking significant caffeinated drinks throughout the day. Helen’s preoccupation with work includes excessive ruminating about work details, rules, and standards that require her to stay at work for extended periods of time, up to 48 hour work day. Helen reports struggling to meet her own high standard of rules, organization and details. She is redoing or re-writing tasks which do not meet her own excessive standard. This impairs the time frame to complete tasks, and disrupts her ability to finish tasks. Helen is making lists to help organize her thoughts and tasks. She is also making lists to delegate tasks to coworkers. However, this is disrupted as she is unable to accept coworker standards of work, and is compelled to redo the coworker’s tasks as well. Helen reports she has no life outside of work, she has no time for it. Helen’s social interactions are impaired due to excessive preoccupation with meeting her own standards. Helen denied current or past audio and visual hallucinations, depression and mania, anxiety disorders including: fears, social anxiety, trauma, dissociation, schizophrenia, eating disorders, over exercising and binge eating.

**Best Diagnosis:** Obsessive-Compulsive Personality Disorder (F60.5):

Helen reports a rigid standard of her own rules, redoing her co-worker’s tasks because they do not meet her own standards. She reports making numerous long lists for herself and her coworkers. Helen reports trying to delegate tasks to her coworkers, however “they never” meet her standards, including details, order and organization. Helen reports historically rewriting school notes because of mistakes, “Not wrong, but not perfect”. Helen reports coworkers put price tags on crooked, out of order, and use the wrong color. Helen reports working 48 hours at a time, and maintains an 80 hour work week at CVS. She devotes to work and productivity to the exclusion of activities which include friends or family. The pervasive obsession is clinically significant impairment with social areas of functioning. Helen is convinced that her obsessive compulsive beliefs are true.

Caffeine Intoxication (F15.929) consumption well in excess of 250 mg; Helen reports having two cups of coffee in the morning, several caffeinated beverages throughout the day including power energy drinks, soda, and at times more coffee. Helen reports restlessness, excitement, flushed face, rambling flow of thought and speech and periods of inexhaustibility.

A trial of short term individual counseling or group sessions to identify emotions and coping mechanisms for identifying compulsory impulses. Bringing awareness of other perspectives, self-talk influences on external influences.