

PSYCHOLOGICAL EVALUATION
CONFIDENTIAL

Name: Summers, Deborah
DOB: 8/8/20xx-21
SSN: 123-45-6

Dates of Evaluation: 12/27/20XX+1 – Consultation with F. C. Fank, plaintiffs' attorney in
Summers v. Hard
1/7/20XX+1 – Interviews of Deborah Summers
1/15/20XX+ 1
1/21/20XX+ 1

Referral: Ms. Summers is a 21-year old ethnically Caucasian American female referred by attorney for plaintiffs in *Summers v. Hard* to evaluate her claims of Post-Traumatic Stress Disorder (PTSD). Counsel is requesting an evaluation of Ms. Summers to determine if she is currently suffering from PTSD.

Ms. Summers witnessed the fatal shooting of her husband on September 3, 20XX. Ms. Summers was observed to exhibit and described suffering severe anxiety and dissociative symptoms within a week following the incident. The symptoms continue to date. Ms. Summers' stepson Ronnie Summers also referred for evaluation and was seen separately on 1/ 7 and 15/XX+1.

Specific questions to be addressed:

Does Ms. Summers suffer from Post-Traumatic Stress Disorder (PTSD) according to the Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV-TR)?

CONFIDENTIAL
Personal Background and Education

Deborah Summers was approximately 21 years old at the time Bruno Summers, her husband, was shot. She married him on August 27, 20XX; he died of a gunshot wound on September 7, 20XX. She has lived with her parents in Ruston her entire life. She has two brothers, ages 33 and 31, and two sisters, ages 27 and 23. She attended the Northwest Elementary School and completed three years at the Major Beach High School.

At the age of fifteen she had contact with the Juvenile Court for the following: truancy; violation of the Uniform Controlled Substance Act (possession of cocaine); and burglary. On the truancy matter, she was referred by the Juvenile Court probation officer to a high school counselor. For the possession of .03 grams of cocaine and a school burglary (both happened when she was 15 years old), she was placed on probation and ordered by the Juvenile Court to perform community service work. The Juvenile Court,

because of her emotional difficulty, also ordered that she have psychological counseling. During the counseling, it was revealed that Deborah Summers had been sexually abused by her father since a young girl, and threatened with harm to her or another family member if she said anything. The therapist determined that, as a result, Ms. Summers suffered from acute Post-Traumatic Stress Disorder (PTSD). Since leaving high school at age 15 1/2, Ms. Summers has worked.

A little less than a week after the incident, Ms. Summers described experiencing an intrusive and disturbing waking visualization of the incident. She described a variety of physical symptoms typical of a panic attack, including "my heart was just pounding," "I was shaking all over. I couldn't breathe, my palms were sweating, and I just couldn't catch my breath." Thereafter, including last week, Ms. Summers described recurring nightmares of the incident, although she denied any repetition of her waking moment "flashback." Ms. Summers also described a decrease in her appetite, citing how food tasted "like cardboard" to her, "even ice cream," which she described as her perennial favorite. Ms. Summers described withdrawing from all social contacts. Normally looking forward to the sense of belonging and safety she usually derived from being around her family and friends, she actively found herself making excuses not to be around anyone. She finally described just "camping out at home" and becoming completely isolated from other people; she feels "completely detached" from others. She described being unable to sleep; yet unable to stay focused on any one activity for very long, being unable to either sit still or to be productively active ("I couldn't even do the laundry.")

Ms. Summers reports these symptoms to continue to date. She had indicated that shortly after the incident she received valium which helped her anxiety, but that her prescription had run out, and she could not find a doctor willing to order a refill.

Summary

CONFIDENTIAL

Does Ms. Summers suffer from Post-Traumatic Stress Disorder according to the Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV)?

Yes.

Ms. Summers meets the criteria for a diagnosis of chronic Post-Traumatic Stress Disorder according to the criteria of the DSM-IV-TR. Ms. Summers has met the criteria for Acute Stress Disorder beginning in the weeks immediately following the incident in September 3, 20XX.

Ms. Summers describes symptoms characteristic of PTSD. For the past three plus months, Ms. Summers has re-experienced the traumatic incident of 20XX through as sleep disturbing nightmares; she has avoided stimuli associated with the 20XX incident (avoiding driving past the Garage tavern); and she has experienced persistent

symptoms of increased arousal that she had not experienced prior to the incident (difficulty sleeping, difficulty concentrating). These symptoms have caused her significant discomfort, both at work and in her interpersonal interactions.

CONCLUSIONS

Ms. Summers suffered an Acute Stress Disorder (DSM-IV-TR Axis I: 308.3) as the result of her witnessing the fatal shooting of her husband on 9/3/20XX. Ms. Summer's symptoms have been consistent with a diagnosis of chronic Post-Traumatic Stress Disorder (DSM-IV-TR Axis I: 309.81) as they have persisted at least three months following the shooting incident.

Before I conclude, I want to make mention of Ms. Summer's depression and suicidal behavior when she was 15-years old. I would first note that there is no indication in her records of any depression in the past five years, up until the time of the shooting. As to past Post-Traumatic Event (i.e., PTSD as a result of sexual abuse by her father), the literature indicates that past episodes of PTSD make a person more susceptible to subsequent episodes.

On a more probable than not basis, Ms. Summer's symptoms meet the full criteria for a diagnosis of chronic Post-Traumatic Stress Disorder (DSM-IV-TR, Axis I: 309.81).

I hope you find this information helpful. Please contact me if you have any further questions or if my responses are unclear.

CONFIDENTIAL

I thank you for the referral.

Pat Gage

Date: February 21, 20XX+1

Dr. Pat Gage, M.D.
Clinical Psychiatrist

In accordance with the requirements of the Americans with Disabilities Act, only information relevant and necessary to evaluate the referral question(s) has been included in this report. This assessment is to be used only in connection with the referral question(s). It is inappropriate and unethical to use this report in any other circumstance.

THERAPIST: P. GAGE

PATIENT: Deborah Summers

FILE NOTES

01/7/20XX+1

Patient presented low affect. Saw new husband murdered by ex-boyfriend. Since then "falling to pieces" feels "numb." Prior to fatal shooting, patient described self as "happy-go-lucky" and "fun-loving."

Patient describes weight loss, depression since shooting. "Constant anxiety." "Cries all the time" – "nervous wreck" – "Can't do a thing; can't eat, sleep, concentrate."

11/15/20XX+1

Same condition. Taking new route to visit her parents to avoid passing "Garage Tavern" – new route much longer! "takes much more time."

Patient revealed that when 15 years old got in trouble: juvenile court (burglary, possession of cocaine). Juvenile Court ordered therapy. Once probation over, refused further counseling. Tried suicide twice (overdose aspirin; drowning). Depressed for three years after she got off probation.

01/21/20XX+1

Same condition. Revealed that Mother and Aunt took antidepressants.

Patient also revealed had previously been diagnosed with PTSD. Resulted from prolonged sexual abuse by father coupled with threats of harm to her and other family members if she said anything.

Patient indicates she has been dating a man since November, who she's thinking about marrying. "I just need someone to take care of me, protect me; and he's very kind and responsible." (Last session with patient)

SUPPLEMENTAL PSYCHOLOGICAL EVALUATION

CONFIDENTIAL

Name: Summers, Ronnie
DOB: 4/11/20XX-8

Dates of Evaluation: 12/27/20XX+1 – Consultation with F. C. Fank, plaintiffs' attorney in
Summers v. Hard
1/7/20XX+1 – Interviews of Deborah Summers and Ronnie Summers
separately
1/15/20XX+1 – Follow-up interview of Ronnie Summers

SUMMARY OF EVALUATION AND CONCLUSIONS

Referral: I evaluated both Deborah and Bruno Summers' son, Ronnie Summers. I met with both on the same date, but interviewed each of them separately. Ronnie's grandmother, Gretchen Summers, also accompanied him to the interviews. Ronnie was referred by the attorney for plaintiffs in *Summers v. Hard* to evaluate claims that Ronnie suffers from Post-Traumatic Stress Disorder (PTSD).

Ronnie Summers witnessed his father, who had been shot, being lifted off the floor of the Garage tavern and onto a stretcher. There was blood all over his father's chest, and he was groaning. Ronnie watched as the EMTs took his father to the ambulance. Since then, Ronnie has exhibited symptoms of PTSD that continue to this date.

Specific questions to be addressed:

Does Ronnie Summers suffer from Post-Traumatic Stress Disorder (PTSD) according to the Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV)?

CONFIDENTIAL

Symptoms

Since the night of the shooting, Ronnie reports having "bad dreams" and he wakes up screaming for his father. He can't remember what he is dreaming about, but it scares him. Ronnie does not want to talk about his father, and when he is pressed to do so, he looks down and goes silent. At other times, when asked about his father, he has outbursts of anger. He has trouble concentrating and cannot sit still. Ronnie has experienced "flashbacks" where he visualizes seeing his parents in the Garage tavern with Deborah screaming and his father's chest covered with blood while he moans in pain.

CONCLUSIONS

Does Ronnie Summers suffer from Post-Traumatic Stress Disorder according to the Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV)?

Yes.

Ronnie Summers meets the criteria for a diagnosis of chronic Post-Traumatic Stress Disorder according to the criteria of the DSM-IV. He has met the criteria for Acute Stress Disorder beginning in the weeks immediately following the incident on September 3, 20XX.

Ronnie Summers describes symptoms characteristic of PTSD. For the past three plus months, he has re-experienced the traumatic incident through sleep disturbing nightmares and flashbacks; he resists talking about his father, and when asked about his father goes silent or has uncontrollable outbursts. He has extreme difficulty concentrating.

I hope you find this information helpful. Please contact me if you have any further questions or if my responses are unclear.

I thank you for the referral.

Pat Gage

Dr. Pat Gage, M.D.
Clinical Psychiatrist

Date: February 21, 20XX+1

In accordance with the requirements of the Americans with Disabilities Act, only information relevant and necessary to evaluate the referral question(s) has been included in this report. This assessment is to be used only in connection with the referral question(s). It is inappropriate and unethical to use this report in any other circumstance.