

**CONFIDENTIAL PATIENT INFORMATION**

CA W&I Code, Section 5328,  
42 CFR Part 2, 45 CFR Parts 160 & 164

County of Orange Health Care Agency  
**Mental Health and Recovery Services**

HCA Custodian of Records  
200 W. Santa Ana Blvd, Ste 125, Santa Ana, CA 92701



Patient: **Midad, Cal A.**  
DOB/Age/Gender: 7/23/2004 18 years Male

MRN: 1000-xx-xxxx

**Evaluations**

Document Name:	BH Assessment - Text
Service Date/Time:	3/31/2023 21:45 PDT
Document Status:	Auth (Verified)
Performed By:	Lum LCP, Mark S (3/31/2023 22:42 PDT)
Signing Clinician/Date of Signature	Lum LCP, Mark S (3/31/2023 22:42 PDT)

**BH Assessment Entered On: 3/31/2023 10:33 PM PDT**  
**Performed On: 3/31/2023 9:45 PM PDT by Lum LCP, Mark S**

**DOMAIN 1**

*I am a Licensed or licensed waived provider. : Yes*

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**Presenting Problems :** Cal is an 18 year-old, Salvadorian male, who was referred to CYS East by his probation officer for anger problems after he violated his probation by getting into a fight with another male. This male was having an argument with his girlfriend that escalated into a physical altercation. The client happened to witness the conflict from afar, and immediately ran to the aid of the girl and told the boyfriend to leave her alone. As a result, he got into the physical altercation with the boyfriend. Cal knocked the boyfriend unconscious, and the boyfriend suffered head injuries that required 39 stitches to close a gash on his head. The girlfriend of the victim called the police and reported that Cal attacked her boyfriend. Although Cal indicated that he was trying to protect the girl, she indicated that she did not need his help. Given that Cal was already on probation, he was arrested. When confronted by his probation officer about why he got involved when he was only 3 weeks away from getting off probation, he couldn't explain what happened and said that he just snapped and really couldn't recall much of what happened. The probation officer told Cal he has a problem controlling his anger and would refer him for mental health evaluation. Cal has already served time as a 16 year-old for assaulting a peer for six month. Cal claimed that this was in self-defense. Cal has a girlfriend and they recently had a child together, who is 1 year old. Cal had promised his girlfriend that he would find construction work, support his girlfriend and son, and would not get in any further trouble.

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**Encounter Smart Template :** Facility: MHP County Tx EOC  
FIN: 100010704963

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**History of Presenting Problem :** Cal reported that he has always had anger problems and peer problems ever since he immigrated with his family to the U.S. from El Salvador at the age of 6. Cal reported that his family had a difficult time seeking asylum in the U.S., and that they suffered much during their journey to the U.S. Cal indicated that he doesn't like talking about it as it upsets him when he thinks about it, especially when he remembers the abuse he and his sister suffered while living in the shelter, while his parents were away at work. When his family finally settled in Santa Ana, CA after 4 months of living in a shelter at the border, he didn't adjust well at school. He had trouble concentrating in class and adjusting to the language and culture change. He felt teased by peers, and teachers and vice principal didn't believe him when he reported it. As a result, he fought his parents to go to school; but his parents sent him anyways, fearing that the school would report Cal as truant, and that they might lose custody of their child. Cal reported that he had stomach problems at school, and was eventually diagnosed by his PCP, Dr. Martinez with IBS. Cal reported school problems and is behind in his credits, but he hopes to graduate if he can make up a years worth of credits.

Cal reported meeting his girlfriend about 4 years ago at school. He reported that she was kind to him and helped him stay calm. She became pregnant in May of 2021 and gave birth to his son, who is now 1 year old old. Cal states he wants to be

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there for his son, but is having more trouble with his fear and anger since his son was born. He wants to move away from Santa Ana, as he doesn't feel safe for himself and his family. However, he noted that when his family is threatened, he will lose control of his temper which has now resulted in two charges of assault and being placed and kept on probation. His probation officer reported that he could have avoided most of the confrontations, if he could control his anger.

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**DOMAIN 1 - Mental Status Exam***I am a Licensed or licensed waived provider. :* Yes*Appears :* Stated age*Manner of Dress :* Appropriate*Hygiene Level :* Normal*Speech Production :* Answers only questions, Other: Labored*Attitude & Rapport :* Distant, Guarded, Apathetic*Eye Contact :* Intense, fixed*Motor Activity :* Other: Restless*Mood :* Depressed, Agitated, Anxious*Affect :* Labile*Thought Processes :* Blocking, Concrete, Perseverating*Content :* Mood congruent*Delusions :* Guilt*Hallucinations :* None*Themes or Preoccupations :* Other: Worried about going to jail and losing his family*Somatic :* Muscle tension, Nausea/stomach distress*Orientation :* Oriented x4*Concentration & Memory :* Impaired*Concentration & Memory Measured by :* Serial 7's / 3's, Naming 3 items*General Fund of Knowledge :* Average*Estimated intellectual level :* Average*Insight :* Poor*Judgment :* Poor

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**DOMAIN 1 - Immediate Concern***Current Thoughts of Self-Harm :* Denies*Current Suicidal Ideation :* Denies*Suicide Risk Indicators :* Current / previous S/I, S/A, Hopelessness / helplessness, Significant life events / stressors,

Perceives self as burden to others, Sees no other option

*Suicide Protective Factors/Consumer Strengths :* Positive connection with family, Seeing a therapist, Will see psychiatrist in 24 - 48 hrs., Other: girlfriend and son*Current Homicidal Ideation :* Denies*Danger to Others Risk Factors :* History of violence, Anger / rage / frustration, History of impulsivity, Agitated easily*Danger to Others Protective Factors/Consumer Strengths :* Positive connection with family, Seeing a therapist, Will see psychiatrist in 24 - 48 hrs., Other: connected to girlfriend and son*Current Grave Disability :* No*Impulse Control :* Poor*Impulse Control Narrative :* Can be reactive if he perceives danger to himself or family

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**DOMAIN 1 - ADL's**ADLs Grid*Personal Hygiene :* Independent

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*Travels Via* : Own Conveyance*Effectively communicates needs to others* : Sometimes

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IADLs Grid*Ability to Keep Appointments* : Independent*Housework* : Independent*Meal Preparation* : Independent*Managing Medication* : Independent*Transportation* : Independent

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*Daily Activities Impairment* : Yes*Symptoms* : Trauma abreacons at school or in public*Behaviors* : School attendance is inconsistent. Poor social relationships outside of girlfriend and family.*Impairments* : Symptoms and behaviors put him at risk for being charged with assault and incarcerated for probation violation. Behaviors affect adjustment in school, academic achievement and maintaining employment.

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**DOMAIN 2 - Abuse & Trauma***Abuse or Trauma* : Yes*Abuse or Trauma Narrative* : Cal reported that he and his older sister were sexually assaulted while living at a shelter, when his family was applying for asylum at the border to enter the U.S. Several teenage boys also living at the shelter "gang raped" his sister, while threatening to kill him if he didn't run away or if he tried to get help. Cal says he has felt extremely guilty to this day in not being able to help his sister. His parents reacted angrily at him for not helping her or getting help. But he ran and said he felt frozen or paralyzed to do anything, and couldn't think of what to do.

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Abuse as Child Past Grid*Physcially Abused?* : Yes*Neglected?* : No*Sexually abused or molested?* : Yes*Witness to violent acts?* : Yes*Were there any other childhood events to note?* : Yes

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Abuse as Child Current Grid*Physically Abused?* : No*Neglected?* : No*Sexually abused or molested?* : No*Witness to violent acts?* : Yes*Were there any other childhood events to note?* : No

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*Describe* : Cal was sexually assaulted at 6 years of age at the shelter. He was threatened physical harm by older youths and witnessed his sister being raped by a group of youth.*If Yes, please describe any negative life circumstances (eg: homelessness) or placements (eg: foster care) which resulted from the past or current Abuse or Trauma?* : Cal lived with his parents until he was 17. His family was homeless on and off when they first were granted asylum, as his parents had difficulty making enough money to pay for rent. Once father secured

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employment after 6 months, they lived in an apartment throughout his childhood. Cal currently rents a room with his girlfriend after his son was born.

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**DOMAIN 3 - Psychiatric History***History of Mental Health Treatment :* Yes*Age of Onset :* 6 years old*Outpatient :* Yes

*Outpatient Mental Health Treatment History Narrative :* Cal and his family first received mental health treatment in September of 2011, when it was discovered that he and his sister had suffered from repeated sexual assaults while immigrating over to the U.S. When the family was granted asylum and they settled in Santa Ana, CA, he and his family were referred to CYS East, where he received individual therapy from this provider; family therapy; ICC, IHBS and Peer Support Services. Cal was discharged from CYS East after 1 year of treatment, once his attendance at school and his peer relationships were stabilized.

*Medication History Narrative :* No current medication for IBS, but dietary changes and fiber supplements have been prescribed. No current psychotropic medications have been prescribed.

*Mental Illness management Impairment :* Yes

*Symptoms :* Cal appears to be experiencing trauma abreacons that result in fight/flight reactions. He has been in denial that he is struggling from trauma from his past, and claims to just need work on controlling his anger.

*Behaviors :* Cal has not followed through with referrals in the past from his probation officer to get mental health treatment for his angry outburst, which initially resulted in a 6 months stay in Juvenile Hall at the age of 16.

*Impairments :* As a result of his denial, he has not gone to mental health treatment since his last episode of care as a child. However, if going to mental health treatment will help his current situation with probation, he is willing and open to treatment.

*Psychiatric Hospitalizations :* No*How many times in the past 12 months has the client been psychiatrically hospitalized? :* 0*How many times in the past 36 months has the client been psychiatrically hospitalized? :* 0

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**DOMAIN 3 - Substance**

*Substance Abuse & Recovery Narrative :* Cal stated that he has used alcohol and marijuana to help keep himself calm and not be so angry, but it has also resulted in some impulsivity and motivation problems. He has had some arguments with his girlfriend over her not wanting to have alcohol or substance in the house, and doesn't want to raise her son in that environment. Cal agrees, but also knows that he is more reactive and irritable now that he has not used in the past 4 months.

*Substance Abuse Impairment :* Yes

*Symptoms :* Although he has abstained from using alcohol or marijuana for the past 4 months, Cal has been struggling with being more reactive in handling his negative emotions.

*Behaviors :* Cal's anger and reactivity has resulted in several physical and verbal altercations.

*Impairments :* As a result of these physical altercations, Cal is not likely to get off probation as schedule and may face some legal consequences as a result, which will also affect his family and his ability to maintain employment.

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**DOMAIN 4 - Medical***I am a Licensed or licensed waived provider. :* Yes

*Medical Problems as Reported by Client :* Cal was diagnosed with Irritable Bowel Syndrome as a child that was exacerbated by the stress and trauma he experienced as a child. No other medical problem was reported.

*Current & Past Medications :* As mentioned earlier, no current medication has been prescribed for his IBS, but the condition is being treated by dietary changes and fiber supplements. He does not have any history of any psychotropic medications.

*Physical Health Care Impairment :* Yes

*Symptoms :* Untreated stress and trauma continue to exacerbate his IBS. His trauma abreacons also causes physical symptoms that results in stomach problems and nausea.

*Behaviors :* At times, he has missed school and work as a result of his IBS.

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**Impairments :** His symptoms and behaviors cause further medical problems that affect his ability to be at work consistently or complete his credits for school. This impacts his ability to provide for his family.

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**DOMAIN 4 - Developmental Hx***20 years old or younger :* Yes*Were the client's developmental milestones achieved within normal limits? :* Yes*Developmental History Narrative :* Previous mental health report when Cal was 6 years of age, indicates that he met his milestones within normal limits.*Issues during mother's pregnancy :* Mother used caffeine, Other: Stressful situation in El Salvador during mother's pregnancy*Perinatal Problems :* None reported*Special Problems, delays or events in childhood :* None reported

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**DOMAIN 4 - Care Coordination***Does client have Medi-Cal / Health Insurance? :* Yes*Does the client have a PCP? :* Yes

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**Physician / HC Provider / Dentist Grid**

<i>Physician / Health Care Provider :</i>	Dr. Victor Delano	Gene Lee DDS
<i>Speciality :</i>	Primary Care Physician	Other: Dentist
<i>Address :</i>	1800 N. Main St, Suite 405 Santa Ana, CA 92701	500 Tustin Ave., Suite 100 Orange, CA 92865
<i>Phone :</i>	714 980-4478	714 580-5647
<i>Fax :</i>	N/A	N/A
<i>Email :</i>	VDelano@PIH.net	GLee@smilecare.net
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**DOMAIN 5 - Family Hx***Primary Care Giver 0-17 :* 1*Primary Care Giver 18+ :* 0*Other Pertinent History :* Yes*Other History exp :* Family history of immigration trauma. Family victimization*Mental Health :* Yes*Mental Health exp :* Sexual and physical abuse of client and sister by non-family perpetrator at age 6 years of age.*Substance Use :* No*Other Medical Condition :* No*Family History (narrative for additional details) :* Cal lived with biological parents and older sister until he was 17 years of age. He and his family went through extreme hardship and trauma during their immigration to the U.S. Both Cal and his older sister suffered from sexual abuse. Cal witnessed his sister being raped and was threatened at knife point that he would be killed if he didn't run away and if he told anyone. Much family anger, guilt and turmoil resulted from the trauma suffered during their immigration.

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Cal moved in with his girlfriend after she gave birth to his son, when he was 17. They initially stayed with his girlfriend's mother, but moved to their own apartment when he turned 18. Cal was taken to Juvenile Hall at the age of 16 for an assault on a peer for 6 months. He's been on probation and has not had any trouble up until this recent incident jumping into another couple's conflict and physical altercation. He has tried to stay away from any alcohol or marijuana for the past 4 months and has been successful; however, he is much more reactive with his emotions. This recent probation violation occurred just 3 weeks from him completing and being off probation, which prompted the probation officer to petition the court to order Cal into mental health treatment.

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**DOMAIN 5 - Education**Education Problems Grid

*Problems learning certain subjects :* Yes  
*Problems with paying attention :* Yes  
*Problems getting along with teachers :* No  
*Problems with studying :* Yes  
*Problems with grades :* Yes  
*Problems with truancy :* Yes  
*Disruptive class behavior :* No  
*Suspensions or transfers :* No  
*Special education :* Yes  
*Special day classes :* Yes  
*Tutoring :* No

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*Education Narrative :* Cal has had trouble adjusting to school in the U.S. when he first came over and was struggling with attendance. He was better with his attendance after 1 year of treatment, and seemed to not have as many problems with peers after treatment. He had trouble in high school completing his classes and seemed to only get along well with a girlfriend at school. His girlfriend was helpful in keeping him in school; however, he fell behind in his credits as he failed several classes for attendance problems. He also dropped out for 1 semester when his girlfriend was pregnant and he was trying to get a job.

*Education Completed :* 11th Grade

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Education History Grid

<i>Date Type :</i>	Estimated
<i>Event Date :</i>	9/1/2022 PDT
<i>Education Status :</i>	Enrolled
<i>Attendance Level :</i>	Sometimes attends/attended school
<i>Grades :</i>	Below average
<i>Special Education Eligibility (Per IEP) :</i>	Emotionally Disturbed
<i>Special Education Setting (Per IEP) :</i>	SDC (Special Day Class)

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<i>Educational Goal (Adults) :</i>	Complete high school or GED equivalent
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*Educational/ Vocational Impairment :* Yes*Symptoms :* Cal's trauma abreacons of feeling threats to himself or family results in risk of physical altercation and legal consequences*Behaviors :* Poor school and employment attendance*Impairments :* Symptoms and behaviors result in both education and employment failures and risk of legal consequences.

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**DOMAIN 5 - Employment\_Financial***Current Employment :* Competitive Part Time*Is Employment a goal :* Yes

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Employment Grid

<i>Employment Year :</i>	2022
<i>LOS :</i>	6 months
<i>Employment Description :</i>	Construction
<i>Avg Hours per Week :</i>	15
<i>Reason for Leaving :</i>	Stomach problems and excessive absences resulted in being laid off.
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*Employment Impairment :* Yes*Symptoms :* Physical and emotional reactivity from trauma (i.e., stomach aches, verbal and physical altercations)*Behaviors :* Excessive absences in school and work*Impairments :* Results in not completing credits in school; Results in losing employment at work;

Results in violation of probation and possible legal consequences

*Income Source :* Self*Amount per month :* 900*Assisted by and/or payee :* girlfriend's mother*SSI/SSDI Status :* Not Applicable*Financial/ Money Management Impairment :* Yes*Behaviors :* Cal's inability to maintain employment*Impairments :* Results in not making enough for rent and food and unable to provide for family

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**DOMAIN 5 - Gender-Sexual Orient***Birth Sex* : Male*Gender Identity* : Male*Sexual Orientation* : Heterosexual*Gender Identity Narrative* : N/A*Preferred Pronouns Narrative* : He/Him/His*Coming out Experience* : N/A*Client's Relationship with their Family* : Positive*Describe how client's relationship with their family, or lack thereof, contributes to the client's current mental health* : Cal maintains a positive relationship with his girlfriend's mother and receives some support from her*If the client identifies as Transgender, are they pursuing a medical transition process?* : No

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**DOMAIN 5 - Living Arrangement**Housing Assistance Grid*Other Financial* : No*Continuum of Care* : No*IPF* : No*IHF* : No*Family Support* : Yes

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*Housing Assistance Narrative* : Girlfriend's mother has rented room to Cal, girlfriend and son*Current Living Arrangement* : Parent/Guardian Home (Minor)*For additional Living Arrangement information, please describe here* : For approximately 1 year lived at girlfriend's mother's house and rented a room. Then recently moved out when he was able to maintain employment.*Living Arrangement/ Housing Impairment* : Yes*Symptoms* : Cal's trauma abreacons*Behaviors* : Cal's difficulty staying out of legal difficulties, keeping job and maintaining stable income*Impairments* : Results in risk of current living arrangement and inability to keep place. Further legal consequences would put job at risk.

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**DOMAIN 5 - Legal***Legal Impairment* : Yes*Symptoms* : Trauma abreacons*Behaviors* : Physical and verbal altercations; probation violations*Impairments* : Puts him at risk for legal consequences that affect his ability to maintain employment and provide for family*Court Involvement* : Yes*If yes, please explain* : Client is on probation for past assault.*Incarceration History* : Yes*If yes, please explain* : Was in Juvenile Hall for 6 months at age of 16 for assaulting a peer.

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**DOMAIN 5 - Cul, Rel, Spirituality***Client's culture and how it may impact treatment/recovery* : Client was born into a Salvadorian family, who immigrated to the U.S. when client was 6 years of age. Client struggled with acculturation issues and adjustment in school. Client reported identifying with his family's religion as Catholic, which he and his girlfriend share the same background.*Client's religion and how it may impact treatment/recovery* : Client does not attend religious services or community; however, client respects his family of origins traditions and beliefs and feels that he would want his son to be raised in the Catholic faith.



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*Client's spirituality and how it may impact treatment/recovery :* Client is searching for hope in spirituality not only for himself, but for his son and girlfriend. Girlfriend's family is also Catholic, which is important in their acceptance of Cal.

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**DOMAIN 5 - Supplemental  
Care Giver Grid**

<i>Care Giver :</i>	Maria & Ernesto Midad	Veronica Gomez
<i>Address :</i>	12 4th St., Apt 3 Santa Ana, CA 92701	25 17th St., Apt 7 Santa Ana, CA 92701
<i>Phone :</i>	714 567-2351	714 570-2898
<i>Fax :</i>	N/A	N/A
<i>Email :</i>	MMidad@gmail.c om EMidad@gmail.co m	Veronica46@gmai l.com
<i>Relationship :</i>	Biological parents	Girlfriend's mother
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**DOMAIN 6 - Harm Assessment***Self Harm Thoughts :* No*Suicide Ideation :* No*Suicide Attempts :* No*Thoughts of Hurting Others :* Yes*Thoughts of Hurting Others Details :* Non-specific statements about hurting anyone who would threaten or hurt his girlfriend or son, or any family member.*Violence History :* Yes*Violence History Detail :* Recent anger outbursts and attacking a peer. Getting involved in a physical altercation between a couple and jumping in to protect the girl resulting in injuring the boyfriend and being arrested by police for another assault and probation violation.*Safety Plan :* 1) Call girlfriend, parents or girlfriend's mother for support

2) Call hotline to speak with someone and use words to delay reacting

3) Call clinic to speak with therapist and IHBS provider

4) Call peer support specialist for support

*Emergency Contact :* Carissa Gomez*Phone Number :* 714 467-2376*Emergency Contact :* Maria & Ernesto Midad*Phone Number :* 714 567-2351*Was a support person informed about the Safety Plan? :* Yes*If yes, who was informed and what is their role in the client's life? :* Girlfriend and parents are in agreement as well as girlfriend's mother. Staff has been alerted to safety plan and their roles in stabilizing a crisis.

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**DOMAIN 6 - Strengths***Client's Strengths :* Cal was described by his girlfriend as generally protective, kind-hearted and means well. He care about his girlfriend, son, older sister and parents. He generally is protective of those who gets bullied or picked on, but also realizes

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that he needs to not get involved to not violate his probation.

*Client's social supports, hobbies, interests :* Client seems to communicate fine with others except when he is angered or threatened, which then brings out a fight/flight type response in him, and he loses his ability to talk and become physically or verbally aggressive.

*Social Relationships/ Communication Skills Impairment :* Yes

*Symptoms :* Client fears and mistrusts people in general. Has difficulty talking to others and problem-solve clearly when stressed or fearful

*Behaviors :* Client is afraid of his angry outbursts resulting in losing his loved ones.

*Impairments :* Client has few friends and limited support network as a result of trust issues.

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**DOMAIN 7 - Clinical Summary**

*I am a Licensed or licensed waived provider :* Yes

*Diagnostic/clinical impression :* Cal appears to be suffering from F43.12 Post-traumatic stress disorder, chronic as he continues to experience trauma abreacons that can be traced back to his sexual abuse trauma and his sister's trauma. Cal may be reacting to his guilt and inability to defend his sister as a child. Presently, he is overly concerned of harm coming to his girlfriend, such that he loses control and experiences his fight/flight or "amygdala hijacking" and loses control and awareness until something happens, and it's too late. Cal has been considered for F91.2 Conduct disorder, adolescent-onset type based on behavioral descriptions that have led to legal consequences; however, this clinician, who evaluated him as a child, is of the opinion that many of his angry outbursts appear to be trauma abreacons that result in his intense emotional outburst of anger or fear reactions, as a result of unresolved and unprocessed trauma experiences and memories.

*Determination of: medical necessity, level of care, access criteria :* Cal meets the automatic access criteria for specialty mental health services due to past exposure to trauma, current juvenile justice involvement and a clinical mental health diagnoses, that cause impairments in his home, education and employment functioning. He meets medical necessity due to F43.12 Post Traumatic Stress Disorder, chronic diagnosis and subsequent impairments in living arrangement/family functioning, school/academics and social relationships. He qualifies for PWB/IS under intensive services as he is being referred by probation and the juvenile justice system. Based on this assessment, Cal meets the outpatient level of care from the MHP for specialty mental health services and would likely benefit from services.

*Treatment recommendations :* Cal would benefit from individual and family therapy with a focus on psychoeducation for both client and girlfriend on the effects of trauma on Cal and his family. Cal would benefit from understanding how his current angry reactions and outbursts are connected to his fight/flight part of his brain that is triggered by traumatic memories, re-traumatizations and his body holding many of his unprocessed pain. He would benefit from learning how to calm his body and stress level when he is able to differentiate between "perceived" versus "real" dangers. Some coping tools can be assessed to see what he has learned from previous treatment as a child, and applied to his current situation. He might benefit from practicing relaxation of his body through breathing and bilateral movements. EMDR (evidenced based therapy) might be beneficial in therapy by helping Cal process and verbalize his painful memories while monitoring his stressful reactions in his body and preventing him from becoming overwhelmed by the memories and topic. ICC can help link Cal and his girlfriend to needed resources that assist him in finding and keeping his job. Referral to support groups may help Cal with his isolation. Peer support specialist with lived experience may help Cal feel understood, connected and build hope/confidence that someone has experienced what he has gone through. Working through the unresolved grief and trauma may help Cal be less reactive, buy himself time to be able to respond and problem-solve conflict situations while maintaining a calm mind. IHBS may be helpful in practicing these coping skills in real time, so Cal can use these coping skills competently when stressed.

*I have completed the assessment and am ready to add a diagnosis :* Yes

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**Diagnosis & Problems**

*Non-ICD problems and conditions :*

266956001 Loss of Job (SNOMED)

105509007 On probation (SNOMED)

274229005 Fight - assault (SNOMED)

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(As Of: 3/31/2023 1:25:09 AM PDT)

Problems(Active)Irritable bowel syndrome with  
constipation (ICD-10-CM  
:K58.1 )*Name of Problem:* Irritable bowel syndrome with constipation ;  
*Onset Date:* 2/10/2023 ; *Recorder:* Lum, Mark S;  
*Confirmation:* Confirmed ; *Classification:* Behavioral Health ;  
*Code:* K58.1 ; *Contributor System:* PowerChart ; *Last*  
*Updated:* 3/31/2023 3:57 PM PDT ; *Life Cycle Date:*  
4/28/2023 ; *Life Cycle Status:* Active ; *Ranking:* Tertiary ;  
*Responsible Provider:* Lum PSYD, Mark S ; *Vocabulary:*  
ICD-10-CMLow income (ICD-10-CM  
:Z59.6 )*Name of Problem:* Low income ; *Recorder:* Lum, Mark S;  
*Confirmation:* Confirmed ; *Classification:* Behavioral Health ;  
*Code:* Z59.6 ; *Contributor System:* PowerChart ; *Last*  
*Updated:* 3/31/2023 6:13 PM PDT ; *Life Cycle Date:*  
4/28/2023 ; *Life Cycle Status:* Active ; *Ranking:* Secondary ;  
*Responsible Provider:* Lum PSYD, Mark S *Vocabulary:*  
ICD-10-CMPost-traumatic stress disorder,  
chronic (ICD-10-CM  
:F43.12 )*Name of Problem:* Post-traumatic stress disorder, chronic ;  
*Recorder:* Lum, Mark S; *Confirmation:* Confirmed ;  
*Classification:* Behavioral Health ; *Code:* F43.12 ; *Contributor*  
*System:* PowerChart ; *Last Updated:* 3/31/2023 1:20 AM  
PDT ; *Life Cycle Date:* 3/31/2023 ; *Life Cycle Status:* Active ;  
*Vocabulary:* ICD-10-CMDiagnoses(Active)Post-traumatic stress disorder,  
chronic*Date:* 3/31/2023 ; *Diagnosis Type:* Discharge ; *Confirmation:*  
Confirmed ; *Clinical Dx:* Post-traumatic stress disorder, chronic  
; *Classification:* Behavioral Health ; *Clinical Service:*  
Non-Specified ; *Code:* ICD-10-CM ; *Probability:* -1 ; *Diagnosis*  
*Code:* F43.12