

STUDENT HEALTH SERVICE

MENTAL HEALTH SECTION

INTAKE NOTE

Name: Shane Todd

UF ID 1193 - 3840

Date: 06.12.03

Present Problem(s)
(Client's Own Words)

Drug Allergy _____

"for the last year I've been having episodes of depression + anxiety."

History of Presenting Problem(s)

U. is a good student in Electrical Engineering. Is a TA and was in National Guard. U. was asked to leave

Past History

National Guard due to poor performance + states that he is having difficulty teaching.

Current Mental Status

U. denies any SEIHI. Admits to feeling depressed, having negative thoughts + low motivation, avoiding social interactions + feeling that nobody cares. U. reports experiencing "negative thoughts" since childhood.

Assessment of Client's Problem(s)

unable to specify frequency or duration of symptoms of depression. "It varies." Reports that his maternal grandfather + maternal uncle have history of

Clinical Impression

depression + alcoholism. U. denies hx of alcohol / substance abuse. No prior counseling. U. identifies parents as main support system. States that he gets anxious in social situations.
Dx Intent: No Depression / Social Anxiety.

Plan/Recommendation(s)

Reviewed services available at SUHS + in community. U. not interested in rec eval at this time. Expressed interest in social anxiety group. U. referred to Dr. Terry for counseling. See on 06.19.03.

Therapist Signature

Beverly A. Brown

Date

06.12.03

PROGRESS NOTES
UNIVERSITY OF FLORIDA
STUDENT MENTAL HEALTH

Date:	Name: Todd, Shane Patient UF ID 1193 - 3840
	Patient SS #
06.12.03	Intake.
	Bo - J - MD
6/19/03	1 st meeting with Shane - asked him about reasons
	for seeking therapy and for background info.
	Reports his feeling better this week but came in
	last wk b/c of anxiety (mostly social) and depression
	issues. Discussed therapy options (doesn't want
	meds at this time) and my way of working with
	clients and these problems. He decided to begin by
	working on his sleep/exercise/eating and
	to pay attention to what's happening to him.
	Did not want to reschedule at this time -
	said he would call later if needed.
	(adj dis, mixed features 309.2x) Anxiety, obs



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The Psychological Wellness Centre

290 Orchard Road #18-03 Paragon Singapore 238859

Tel: (65) 6733 7488 Fax: (65) 6235 6846

Website: www.psychwellnesscentre.com

Business Reg No: 53154681X

Your Ref:
Our Ref: PWC-2012-60

26th August 2012

MUHD KHALDUN
SENIOR INVESTIGATION OFFICER
CENTRAL POLICE DIVISION HQ
391 NEW BRIDGE ROAD
POLICE CANTONMENT COMPLEX A
S 088762

RE: TODD SHANE TRUMAN
NRIC NO: G5032159U

I refer to your request for a medical report on the above named.

Professional Qualifications

I am a Consultant Psychiatrist working in private practice at The Psychological Wellness Centre. I left my position as consultant psychiatrist in the Institute of Mental Health (a tertiary psychiatric referral centre) where I was the Deputy Chief of the Department of General Psychiatry 1 at the end of 2009. I was also concurrently at that time, the Director of both the Ministry of Health's and the Institute of Mental Health's General Practitioner Partnership Programme. I graduated with a Masters of Medicine, Psychiatry, awarded by the National University of Singapore in 2001. I also have a Graduate diploma in Psychotherapy (Psychodynamic, Distinction) awarded by the National University of Singapore. I had also previously been the Vice-President of the Singapore Psychiatric Association.

My experience in forensic matters include being involved in providing a psychiatric opinion for forensic cases remanded for observation in the forensic ward of the Woodbridge Hospital. I have also examined cases involving capital punishment such as cases of homicide and murder in the Singapore High Court. I am currently also appointed as an expert witness by the Medical Protection Society in litigation cases involving medical practitioners with a psychiatric component to the case history.

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Presenting history

He was first seen on the 4th of April 2012. He was referred by his family doctor who referred him to see me as he had noted an increase in the levels of work stress with progressive difficulty coping.

He reported that he has had a history of clinical depression in the past. This was in 2002. There was also significant family history in that both his grandfather and uncle had also suffered from depression in the past.

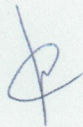
He reported that in the previous episode, his mood had been considerably worse and but in this episode, what felt worse was the sense of anxiety. There had been poor sleep with early morning awakenings and also loss of appetite. His concentration was also decreased and his energy levels were also affected. There had been also been a lot of anxious thoughts which he felt difficult to control. He however did not feel that life held no meaning nor were there any suicidal ideations expressed. He reported that his mood state was not as bad as the last time but was worried it would deteriorate.

Mental State Examination

Mental state examination revealed a young Caucasian gentleman who was neatly dressed. He was co-operative with generally good eye contact and was conversant in English. Mood state was generally low, and he was tearful when describing the more painful aspects of his life. He was also noted to be particularly anxious and tense when describing some of the problems he was facing, and expressed a desire to become better again. He was relevant and coherent and there did not appear to be any psychotic signs or symptoms. He did not express that life held little meaning nor was he suicidal at that time.

Diagnosis and Opinion

My diagnosis for him was that he suffered from a relapse of his depression. He was also noted to have a significant component of anxiety. I provided some supportive work and also decided to start him on medication. He was started on an antidepressant, Lexapro 5 mg at night for the first week and this was titrated up to 10 mg (the therapeutic dose) from the second week for another 2 weeks. He was asked to come for a review in 3 weeks from the first appointment but did not turn up for subsequent follow-up. The first visit was also the last time he was seen in the clinic.



DR NELSON LEE
MBBS
MMED PSYCHIATRY
CONSULTANT PSYCHIATRIST
THE PSYCHOLOGICAL WELLNESS CENTRE

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