Name: Erika Katrin Meyer | DOB: 3/29/1968 | MRN: 20002029698 | PCP: Thomas P. Warrington, MD

Visit notes

Progress Notes by Shaun Michael Burns at 02/22/21 1330

Behavioral Health Initial Visit (Zoom Virtual Appointment)

Visit #1

Visit Length/Total face to face time w/pt: 30 minutes

Informed Consent: Informed consent completed at initial visit.

Chief Complaint

Patient presents with

BHI - Behavioral Health Integration

Subjective:

Pt was referred to behavioral health by Thomas P. Warrington, MD to address

1. Delusional disorder (HCC)

Initially noted on 6/3/2014 per pt's medical record.

"I am subject to a trauma-based mind control system."

Patient strengths: Pt is bright and articulate.

Objective:

Mental Status Exam:

Thought process/Concentration: delusions

Speech: Pressured

Appearance: alert, cooperative, agitated, anxious, appears stated age and well-nourished

Mood/Affect: constricted; constricted

Harm to self/others: Denies. Judgment/Insight: delusions

PHQ-9:

Depression screening performed: No - Patient not screened

GAD-7:

Total score:

No anxiety symptoms

PAM:

Pt did not complete the PAM

1. Delusional disorder (HCC)

Assessment:

Erika Katrin Meyer is a 52 y.o., Caucasian female referred to behavioral health integration to address a suspected delusional disorder. During the present assessment the patient voiced a variety of beliefs, reported experiences, and thoughts likely supportive of a delusional disorder. These include the assertion that for the majority of her life she has been subject to wide-ranging forms of torture, medical experimentation, sexual-trafficking, and physical attacks. Though the patient contends that this happens to other individuals in society as well, she contends that her family has been targeted for unspecified reasons and the threats she and her family contend with are supported and/or organized by crime syndicates, local and federal law enforcement agencies, and the medical establishment. The patient asserts

that she has been implanted with tracking and mind control devices throughout her life. The patient notes that signals and information emitted from these devices is monitored and controlled by unregulated drone activity. The patient notes that she is not able to work as she has long been subject to harrassment, bullying, and other forms of mistreatment in her places of employment and that the treatment she endures is systemic and coordinated. The patient was quite reluctant throughout the present interview to discuss details of her personal life as she viewed these areas as non-relevant to her experiences of persecution. Given the information provided by the patient during the present interview, it is the writer's opinion that the patient likely lives with a Delusional Disorder, persecutory subtype. Interventions performed include building rapport, providing support, and review of symptoms. Pt responded well and expressed understanding.

Plan:

Pt set the following goals: have delusional disorder diagnosis removed from medical record given patient's perception that she does not have the disorder.

Pt would benefit from ongoing behavioral health interventions to address presenting concerns. In addition, pt should continue to work with her PCP to address the presenting concerns.

No future appointments.

Recommendations to PCP/Care Team: No further contact with the patient is anticipated.

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