

[ADD CODE] Course in Observing and Documenting a Mental State Examination

Transcript 1: Loren scenario	
Vimeo link:	https://vimeo.com/1087972853/5ebb23aede
Clinician:	Oh, hi, Loren. It's lovely to see you. Thanks so much for dialling in for our telehealth session today. Before we get started, I just want to check. How's all your tech? Can you hear me OK?
Loren:	Yeah, I can see and hear you fine.
Clinician:	That's great. Thanks, Loren. So tell me, what would you like to talk about today?
Loren:	Well, things just haven't gotten any better with the bullying at work.
Clinician:	I'm sorry to hear that still happening.
Loren:	Yeah. And I know you said that if things get too hard or I get overwhelmed or before I melt down, that it's better to catch it and to try and talk about it with you.
Clinician:	Yeah, of course. Do you want to tell me a little bit about what's been happening?
Loren:	Um, I'm just finding it really, really hard at work. There is so much gossip, and my boss is a bully. Well, as you know, I work in a marketing team. And anyway, my boss has been pretty negative about most of my ideas for a while now for the last few months. And he keeps giving me really blunt feedback. He's like, you aren't cool enough with your ideas. They're so boring, so old fashioned. And I don't know. I just-- I don't say things the way others do, and I don't dress the same. So he thinks I'm not cool.
Clinician:	Hmm. And how have you been coping with that?
Loren:	I just pretend it doesn't bother me, but it's getting harder and harder.
Clinician:	Yeah.
Loren:	I'm coming home and bawling my eyes out, and I'm bingeing on really crap food. And I know I shouldn't.
Clinician:	Hmm. Have you noticed any changes with your appetite? Or maybe that your clothes aren't fitting you the same?
Loren:	No, not really. It just-- on work days, I'm so stressed at work, so I feel sick, and so I don't eat all day. And then I'm super hungry by the time I get off the bus.
Clinician:	Yeah, of course. I'm really sorry to hear that this work situation is continuing to be so upsetting.
Loren:	Yeah, it's so shit. And since I found out I have ASD, what was that, six months ago?
Clinician:	Correct, yeah.
Lo ren:	I've always known something was different with me, but I can't-- it's just-- it's really causing me to spiral. And getting referred to you guys for depression, and I'm seeing an autism counsellor, too. I'm still learning what autism is. I just know I'm different.

Clinician:	Aww. Look, Loren, it's been a lot. And you've been working extra hard trying to figure all of this stuff out. I'm just wondering, given everything that has been going on, how has this been impacting your mood?
Loren:	Well, I'm really depressed, probably the most depressed I've ever been.
Clinician:	So on a scale of 1 to 10, with 1 being very mild and 10 being extremely depressed, where would you say you're at at the moment?
Loren:	Um, a 9 out of 10.
Clinician:	OK, yeah. So that really suggests to me that things are tough at the moment. How long would you say you've been feeling like this? And is it always a 9 out of 10, or does it sometimes change?
Loren:	My mood's been pretty bad lately. It's been all day, every day, pretty much. And my workplace is not helping. We used to have a set routine. But now it's so dynamic, and they want me to be more dynamic.
Clinician:	So routine is important to you?
Loren:	Yes. And I've not coped since they brought this new boss in 12 months ago. And we used to have a very clear daily schedule, but not anymore.
Clinician:	Hmm. Can you tell me, what does it mean for you when you say 'not coped'.
Loren:	Well, I'm just really anxious as soon as I arrive. And I know you've helped me figure out that some of that is my sensory needs, like getting to know when I'm really overwhelmed, like with the lights when they're too bright at work. You know, with the floors?
Clinician:	Yeah, that's right. Have you used any of the strategies that we've talked about previously?
Loren:	Yeah, I have. I try and sit in the areas that are less bright if I can, or I wear my reading glasses, although I don't need them, but it helps a bit, which means the finger flicking isn't as bad.
Clinician:	OK. So do you mean that it's a little bit less?
Loren:	No, I don't think it's as noticeable to others at work.
Clinician:	Right. So how often would you say you're doing it?
Loren:	Only when I'm really anxious. Like, just when I'm around new people or something changes. Or if I'm-- like, I would say it's probably only once or twice a day right now, only when I'm really anxious. But it was constant a few months back.
Clinician:	Yeah, it sounds like you've worked really hard on that. And while we're talking about anxiety, how would you rate it at present, if 1's really mild and 10's the worst?
Loren:	It's up and down. It can change suddenly. Right now it's probably about a 5, but it flares up with stress.
Clinician:	What would be some examples of that stress?
Loren:	Work being different. I just-- I don't know. I feel like I'm weird at times.
Clinician:	Hmm. In what ways?

Loren:	Like, I don't make friends the way others do. I have some friends, but we tend to just do painting group, and I don't really see them outside of that.
Clinician:	Hmm. Do you feel lonely?
Loren:	All the time. I want to connect, but I don't know how. And whenever I try to talk to friends or others, I just never know the right thing to say. And it's hardest on the weekends that I don't have painting group. As you know, we only do it once a fortnight.
Clinician:	Yeah. Yeah. Look, it can be really hard sometimes knowing how to connect with other people. What else have you been doing to fill your time?
Loren:	Cleaning. There's always so much to clean.
Clinician:	Hmm. And what other ways have you been spending your time when you're not at work or cleaning?
Loren:	Um, well, I have my two cats. And then I just clean.
Clinician:	How long would you spend your cleaning each day?
Loren:	Probably two to three hours during the week. And then, like, maybe five or six on a Saturday or Sunday.
Clinician:	Hmm. And what would happen if you don't clean a lot?
Loren:	Meltdown.
Clinician:	Yeah. Have you had any meltdowns lately?
Loren:	About a week ago.
Clinician:	Hmm. And just remind me again, Loren, what do meltdowns look like for you?
Loren:	I can't talk. I can't move, and I just feel stuck.
Clinician:	Hmm. And what about in your mind? What does it look like in your mind?
Loren:	I-- just feels like my thoughts are going really fast. And then I can't stop thinking about the cleaning and the dirt and the germs and being bullied. It's like a voice over and over again that won't stop.
Clinician:	Hmm. And tell me, is it like hearing someone else talking to you, say, from across the room? Or is it more your own voice and thoughts that you hear inside of your head?
Loren:	My own voice. I don't hear voices from anywhere.
Clinician:	OK. No, thanks so much for clarifying that for me, Loren. Can you just take me through what it was like when you had that last meltdown?
Loren:	Well, it's like my mind was just racing with all these ideas about the dirt.
Clinician:	Hmm. OK, Loren. There's just a couple more questions I need to ask you just to help clarify a few things for me. And we've probably gone over these together before in previous sessions, but do you ever hear or see things that others aren't able to?
Loren:	No. The lights are the main issue. Sometimes a lot of noise can be overwhelming, but I don't hear or see anything out of the ordinary, if that's what you mean.

Clinician:	OK. And what about any other strange experiences that might be unusual? Tastes or smells that seem to come out of nowhere, but other people around you don't notice.
Loren:	No.
Clinician:	No. What about sensations of being maybe touched on your skin, again, when nothing else is actually touching you?
Loren:	No.
Clinician:	No. Do you have any worries or concerns that people want to harm, say, you, or maybe even your cats?
Loren:	Never
Clinician:	And do you ever have any thoughts that you just can't get out of your mind?
Loren:	Mainly the cleaning and the work stuff.
Clinician:	Hmm. I'm just wondering, would you say you get stuck on certain thoughts?
Loren:	That's a good way to explain it. Stuck on the situation? Very often.
Clinician:	Hmm. How often do you have those periods of feeling stuck? Is it every day or a few times a week? Or maybe just once a week?
Loren:	Probably a few times a week at the moment.
Clinician:	Hmm. Could you maybe talk me through one of those times?
Loren:	Well, like I said, I hold it together at work these days. I don't do it there. I focus on my work. And I stay on track, and I meet all my deadlines, usually earlier than normal.
Clinician:	Yeah. Oh, I know how important work is to you, Loren, and how much effort you put into it. You said it feels like you become stuck on a situation. Can you just describe that a little bit more to me?
Loren:	Um, yeah. Well, I mentioned how the evenings are hard. It's like my mind is-- my thoughts are on a continuous loop, and especially if something bad happened that day at work.
Clinician:	Hmm. What do you mean by something bad?
Loren:	Well, the criticism or the bullying. Sometimes he does it in front of others, and that's the worst. Like in the lunchroom last week, he said that my new idea was so ancient.
Clinician:	Hmm. How did that make you feel?
Loren:	I just kept thinking about it. It's all-consuming.
Clinician:	Does anything help?
Loren:	Sometimes I monitor number plate on the way home from work, and I play this game.
Clinician:	OK. What game is it?
Loren:	Well, I think of a letter, say, an M. And then I say to myself in my mind that if I see a number plate with an 'M' on it, then things will be OK, and then I look for an 'M'.
Clinician:	OK. So what happens if you don't see an 'M'?
Loren:	I usually see one.

Clinician:	OK.
Loren:	But if I don't, then things get worse inside. But then I say to myself, if I see another letter, then I-- then things will get better. And then I see it, and things are OK for a moment.
Clinician:	Hmm. I haven't heard of this game before, so can I just check my understanding? So if I say to myself, if I see a letter 'P', I will feel better. And then I see a number plate. It contains a 'P' and my anxiety is relieved a bit.
Loren:	Yeah, that's it. You can do it, too. It helps.
Clinician:	Great. Thanks, Loren. Look, I know that we don't have much longer left today. But before we finish up, I do just want to check in. Given that before you said that you would probably score yourself around a 9 out of 10 for depression at the moment. Have you had any thoughts about dying or that life is not worth living?
Loren:	Um, I sometimes get the idea to go to sleep and never wake up.
Clinician:	OK. How would you do this?
Loren:	I wouldn't intentionally do anything. I just hope that I die in my sleep from natural causes, like a heart attack or something. But nothing painful. And I wouldn't kill myself. What would happen to my cats?
Clinician:	Yeah. I can tell your cats are really important to you. Loren, I just want to check. Have you had any thoughts to harm others?
Loren:	No, I never feel angry, just depressed.
Clinician:	Hmm. And has feeling depressed affected your energy or your motivation, do you think?
Loren:	Yeah, everything is an effort at the moment, and it's really hard to just get out of bed.
Clinician:	Hmm. Actually, how is your sleep?
Loren:	Not great. I take forever to fall asleep, and then I wake up a lot. And then by the time the alarm goes off at 6:00am, then I'm in a very deep sleep.
Clinician:	Yeah, that's really hard. And it definitely then affects your energy for the rest of the day. Can I just check how long has this poor sleep and low energy been going on for?
Loren:	Um, it's hard to remember. Maybe a few months, but it's gotten worse the past couple of weeks.
Clinician:	Yeah, I'm so sorry that these last few months have been so difficult for you. Given everything that has been going on I'm just curious, Loren, how has your memory at the moment?
Loren:	Um, it's been pretty bad lately. I almost forgot this appointment, which is very unlike me.
Clinician:	Yeah. What about your memory for past events, like when you were younger?
Loren:	Older memories are fine. I still remember school stuff. And I remember the theory from uni. So I can still do my work. And I remember the numbers of the paint colours that I mostly use for my art class.

Clinician:	Oh, that's impressive. When are you going to art class next?
Loren:	Oh, this Saturday. I'm really looking forward to it.
Clinician:	Hmm. Lovely. What else are you looking forward to?
Loren:	Spending time with my cats and sleeping in on the weekends. It's so nice when the alarm doesn't go off.
Clinician:	Oh, gosh, it is, isn't it? How long have you been sleeping on the weekends?
Loren:	If I don't have art on, um, about eight or nine hours. I like to feel recharged by Monday morning.
Clinician:	Umm. Look, Loren, it's been so lovely catching up with you today. And I believe we're seeing each other again next month. And maybe when we catch up then, we can actually have a look at some sleep hygiene techniques together. In the meantime, I know that you've got your GP review. But if anything else comes up, you can always reach out to us beforehand.
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