

PSYCHIATRIC EVALUATION

Name:		Date:	Time:
examiner's identity-role		purpose of evaluation	limits to confidentiality
Age:	DOB:	Present:	
Birthplace		Site:	
Language:		Translator:	

DEVELOPMENT: parents/caregivers, perinatal, milestones, siblings, residences

parental discipline, physical/sexual abuse, neglect, losses, exposure to violence, runaway

EDUCATION: highest grade, special ed., counseling, GED, skipped/repeated years, grade range, truancy, fights/suspensions, activities/interests, higher education

MILITARY: service, postings/action, disciplinary actions, discharge type, benefits, trauma exposure

EMPLOYMENT: current and past, salary, problems/reliability

public assistance/loans, unofficial/illegal earnings, alimony/child support

SOCIAL: current residence, marriage, domestic partners/roommates, children and step-children

sexual preferences/behaviors

ethnic/cultural background, religious practice, friends/clubs, interests/activities

CRIMINAL/VIOLENCE HISTORY: arrests, sentences, juvenile delinquency, parole/probation, violation

criminal behavior not caught, fights/violence as youth/adult, domestic violence/abuse, animal violence, property destruction, arson, weapon use/access, sexual violence/coercion, harassment, gang affiliation, racism, violent thoughts

FAMILY HISTORY: medical, psychiatric, drug/alcohol and violence history of parents, siblings, offspring and others

ALCOHOL/DRUGS: onset, extent, periods of sobriety, treatment, tolerance, withdrawal, medical, psychiatric and social consequences (alcohol, mj, cocaine, opiates, stimulants, hallucinogens, pcp, inhalants, steroids, sedatives, cigs)

MEDICAL HISTORY: medical problems, neurological, HIV/STDs, tests

surgeries, pregnancies, traumas

ROS: fever, weight loss, fatigue, rash, headache, dizziness, syncope, LOC, vision, hearing, cough, chest pain, breasts, GI pain, n/v/d, constipation, discharge, dysuria, urgency/frequency, bleeding, pain/numbness, seizure, tremor, menses

MEDICATIONS: current medical

past medical

current psychiatric

past psychiatric

OTC/supplements

allergies

PSYCHIATRIC HISTORY: present illness, past onset, hospitalizations, outpatient, therapy, symptoms

suicidal thoughts/actions, self-harm

diagnoses

MENTAL STATUS EXAMINATION:

Current complaint:
Appearance:
Behavior:
Motor:
Speech:
Flow of thought:
Affect:
Mood:
Psychiatric ROS: sleep, appetite, energy, sexual, anxiety, panic, fears, compulsions, memory, black-outs, impulsivity
Thought content: suicidal, violent, delusions, obsessions
Perceptions:
Orientation:
Concentration:
Memory:
Knowledge:
Abstraction:
Insight:

FURTHER AREAS TO COVER, DEPENDING ON THE LEGAL ISSUE

Fitness to Stand Trial:

- Charges, accusations, potential maximum sentence
- Roles of court personnel: defense attorney, DA, judge, jury, witnesses
- Plea options, potential outcomes, plea bargain, time-served, NGRI
- Testimony, right to remain silent, objections
- Ability to weigh options and make reasoned decisions about case
- Ability to work with defense attorney
- Consider malingering

Criminal Responsibility:

- Detailed account of crime and surrounding events
- Motivation, intentions, rationale, understanding (at time of crime)
- Clarification of discrepancies, consider malingering

Involuntary Commitment/Dangerousness:

- Insight into illness, need for treatment, past behaviors
- Judgment, internal control, impulsivity
- Empathy, regret, remorse, entitlement, blaming of others
- Persistence of cravings, delusions, preoccupations, negative attitudes
- Future plans, treatment alliance
- Consider minimization

Involuntary Treatment:

- Knowledge and appreciation of illness and need for treatment
- Perceived benefits and side effects of current and past treatments
- Personal preferences, religious factors, advance directives
- Reasons for refusing treatment, pattern of refusal
- Ability to weigh benefits and risks of treatment and of refusing treatment

Disability/Injury:

- Detailed account of injury/complaint
- Detailed account of current functioning
- Prior history and functioning
- Exploration of context of impaired functioning (work, home, social/recreation)
- Future plans
- Consider motivation, malingering, false attribution

Note: These and other forensic issues may require other specific inquiries pertinent to the relevant standard in your jurisdiction. Be sure to clarify the standard with the attorney who retains you prior to interviewing the subject. I recommend taking additional interview notes on a pad of lined paper, numbering the pages as you go. Make note of the time when you take a break or end the interview. Save your notes, and keep in mind that they may be entered into evidence.