

12-23-80 - FIRST REVIEW CONFERENCE NOTE CONT'D:

cooperative and with good recall; however, the information received from his friends was far more enlightening than that received from him. He has been rejected by his mother, but refuses to accept this. His adjustment has been very poor, and he has been continually in violation of the law. He seems to have no idea how to go about caring for himself. When confronted with this information, he stated that he was afraid we would not extend treatment if we knew all of the facts. Daniel has little or no self-esteem and views himself as being worthless. Apparently he uses alcohol to soften these feelings. He has suffered the social and legal problems that accompany excessive drinking. When his case was discussed at admission conference on December 5, 1980, he was included in the Alcohol and Drug Abuse Treatment Program on Weston Hall. He has a tendency to argue, and his behavior is sometimes immature. He likes to tease. He enjoys the social functions. He has been cleared to work in maintenance washing cars.

PROBLEM #1: ALCOHOL ABUSE: manifested by history of charge of DWI (1-80); approximately eight alcohol related hospitalizations (1978-1980); three blackouts, minor morning shakes, morning drinking (1979); binge drinking and alcohol related social problems (1977).

Goals:

ST-a To be alcohol free during treatment.

Progress: Mrs. Bertagnolli reports that the patient has not been observed using alcohol or drugs, and goal is partially achieved.

Treatment: Continue in the hospital structure, up to ninety days, under Mrs. Bertagnolli's direction.

ST-b Understand how his abuse influences all areas of his life.

Progress: Patient has attended five of the educational classes. He has been prompt, alert to class discussions, and attentive to the presentations; he has offered no comments and has not discussed this information outside of class. He keeps the handout materials. He has been in seven sessions listening to taped educational presentations. Goal partially achieved.

Treatment: Continue to attend ADTS educational classes bi-weekly and listen to taped educational materials at least twice weekly, unless otherwise indicated, under Mr. Hitchcox' direction.

ST-c Relate his illness to that of fellow alcoholics.

Progress: Daniel has been in four group sessions and three individual counseling sessions with Mr. Hitchcox. He is attentive to the group process and answers questions concisely. He admits that he is unwilling to admit that his mother does not want him. He needs her love and is always willing to give it one more try, although he knows it will result in pain. He is more open in the individual sessions, delving deeper into his feelings of rejection and the resulting pain. Goal partially achieved.

Treatment: Continue group counseling twice weekly and individual counseling once weekly with Mr. Hitchcox.

ST-d Introduction to A.A.

Progress: Patient was late for the A.A. orientation class with John Hannahs, B.A. He offered no comments and was only fairly attentive. This part of the treatment is completed.

Mrs. Gerrard notes that he attended two hospital A.A. meetings. Goal is minimally achieved.

Treatment: Continue to attend weekly A.A. meetings under direction of Beth Gerrard, P.T.C.

LT-a Posthospitalization assistance.

Progress: Mr. Dills has not interviewed the patient to discuss aftercare treatment. This has not been explored by Mr. Hitchcox. Goal not achieved.

Treatment: Continue referral for in-hospital contact by Joseph Dills, MSW, Liaison Social Worker; Continue individual counseling with Mr. Hitchcox.

19929 COOK DANIEL W M V  
12/1/80 7/23/61 LDS

Wyoming State Hospital  
PHYSICIANS NOTES

ER 000193

12-1-80 - MEDICAL HISTORY AND MENTAL STATUS EXAMINATION:

Identifying Information: Daniel Cook is a nineteen year old, single, white male truck driver who was admitted to the Wyoming State Hospital by Voluntary Application on 12-1-80 from Rock Springs, Sweetwater County for alcoholism, depression and attempted suicide. He had been in the Sweetwater County Memorial Hospital 11-28-80 until coming here today for overdosing on Sleep-Ez. He took approximately one-half bottle of these pills.

MEDICAL HISTORY:

This patient began drinking at age sixteen and claims he blacked out the first time he drank. He went into the Army in 1978 and drank to the point of intoxication every time he got a pass which was four or five times a week. He had minor trouble because of his drinking while in the Army but denies any serious problems. He was released from the Army in March of this year, laid around until August and drank heavily most of the time. In August of this year he moved to Rock Springs, got a job as a truck driver and has remained there since. He has been a heavy daily drinker since March of this year consuming up to a case of beer and a half a pint of whiskey per day. He has had blackouts and for the past month has had the morning shakes which he treats by drinking a couple of shots of whiskey and a glass of milk. He may have had one visual hallucination about one year ago but none since. He denies D.T.'s or seizures. On September 28, after drinking hard all day, he started reading some of his mother's old letters. He became depressed and tried to kill himself by taking a half bottle of Sleep-Ez. He awakened in the hospital and claims he does not know who was responsible for his transfer from his apartment to the hospital. While in the hospital, his doctor suggested he come here for the Alcohol and Drug Treatment Program, and he was introduced to members of the Southwest Wyoming Mental Health Association in Rock Springs. These people also felt he should come here and arrange for his admission. He claims he has had no previous treatment for alcoholism, admits to about six arrests for public intoxication and drunk and disorderly, and one D.W.I. in April of this year. He admits that he was fired from his present job on 11-25-80 for drinking on the job, but claims this is the first job he has lost because of his drinking. He claims he has worked about two and a half months out of the last eight.

Past History: Mumps, measles and chickenpox as a child. Pneumonia, age eight, for which he was hospitalized one week. He has had asthma since age nine. T & A at age eleven. Fracture of the left thumb fixed by internal fixation 1977.

Family History: He knows nothing about his natural father. His mother is alive, age thirty-three she has cancer of the lung. Has no brothers but has one sister, age twenty, who is in good health. A paternal grandfather had a nervous breakdown for which hospitalization was necessary. As far as he knows there is no diabetes or tuberculosis in the family.

Marital History: He has never married.

Military History: He serviced in the U.S. Army from 1978 to 1980. He was considered an active reservist until he was put on inactive reserve at the beginning of his present trouble.

Inquiry by Systems:

E.E.N. & T. - No present complaints.

Cardio-Respiratory - He has had asthma since age nine. He treats this on a p.r.n. basis with Marax.

G.I. - No present complaints.

G.U. - No present complaints.

Neuromuscular - No present complaints.

MENTAL STATUS EXAMINATION:

Attitude and General Behavior: Appearance - a well-developed, well-nourished, healthy appearing white male who is appropriately dressed in hospital attire; his grooming is good. Behavior since

19929 COOK DANIEL W M V  
12/1/80 7/23/61 LDS

Wyoming State Hospital  
MEDICAL HISTORY &  
MENTAL STATUS EXAMINATION

ER 000194

12-1-80 - MENTAL STATUS EXAMINATION CONT'D:

admission has been appropriate and cooperative. His attitude is one of needing help, though maybe not hospitalization.

Attitude and Behavior During the Interview: His attitude toward the interviewer was pleasant and cooperative. There were no abnormal movements nor motor activity. His facial expression indicated a mild depression. Interpersonal reaction and cooperativeness with the interviewer were good.

Stream of Mental Activity: His verbal productivity was fairly good. His speech was spontaneous, coherent and relevant. He expressed his ideas satisfactorily. There was no indication of blocking, circumstantiality, distractibility or language deviations. His reaction time in responding was about average.

Emotional Reactions: He appeared and admitted to feeling somewhat depressed at the present time. He denied suicidal thoughts at this time and claims he has made only one suicidal attempt in his life. There is no indication of undue irritability, anger, happiness, elation, suspiciousness, boastfulness nor indifference.

Mental Trend: Content of thought was normal. He was able to give an organized history of his problem. There was no indication of persecutory trends, hypochondriacal ideas, ideas of unreality, nihilistic ideas, grandiose ideas or other depressive trends. He denies hallucinatory experiences and illusions.

Sensorium, Mental Grasp and Capacity:

Orientation - Sensorium was clear. He was oriented to person, place and time.

Personal Identification - He gave his age as nineteen; place of birth Chicago, Illinois; school achievement high school graduate.

Memory - He was able to remember some of the details of his admission. He knew where he was yesterday and could give the details of his trip from Rock Springs to Evanston. He was given a five-digit number which he could remember after five minutes and give in reverse.

Fund of Information - He knew that Carter was the present president and named the presidents from Carter to Eisenhower leaving out Johnson and Kennedy. He knew the Mississippi was the largest river, thought Texas was the largest state, thought that Casper was the capitol of Wyoming. He feels that the biggest problem facing the people of this country at the present time is inflation. By inflation he means "prices going up."

Counting and Calculation - He knew his times tables well and did simple addition correctly. He did Serial 7's from 100 to 0 at average speed with three errors.

Judgement - He differentiated between steal and borrow correctly but did not give a good differentiation between lie and mistake. He was given four common proverbs, all of which he answered abstractly but poorly.

Insight: When asked "why do you drink" he replied, "I start out wanting it to enjoy myself and end up needing it." When asked what he hopes to get out of his hospitalization he replied, "Get myself straightened out and off the booze."

Summary of Mental Status Examination: A well-developed, well-nourished, healthy appearing white male who is appropriately dressed in hospital attire; his grooming is good. His behavior since admission has been appropriate and cooperative. His attitude is one of sincerely needing help but not being convinced he needs to be hospitalized for it. His facial expression appears a little depressed. His verbal productivity was good. Speech was spontaneous, coherent and relevant. He was able to express his ideas satisfactorily and his reaction time in responding was about average. Emotional reactions - he appeared mildly depressed and admitted to feeling that way. He denies suicidal thoughts at the present time; his affect was a little flat. Content of thought was normal. Sensorium was clear. He was oriented to person, place and time. Memory, both remote and recent, was good. Fund of general information and counting and calculating ability was about as expected for his education. Differentiations and interpretation

19929 COOK, DANIEL W M V  
12/1/80 7/23/61 LDS

Wyoming State Hospital  
MEDICAL HISTORY &  
MENTAL STATUS EXAMINATION

ER 000195