



BIO-PSYCHOSOCIAL ASSESSMENT

Mi Tierra Medical Group Corp.



Type of Assessment: HN Bio-Psychosocial Evaluation

Case No **1035**

Date of Assessment: 11/1/2024 Place Of Service: CMHC (53) Start Time: 8:00 am End Time: 8:56 am

Part 1: Recipient Information			
Client Name	Date of birth	Age	Gender
LORENZA GONZALEZ	06/16/1951	73	Female
Address		Phone Number	
3901 SW 109TH AVE MIAMI, FL 33165		786-326-9878	
Social Security	Preferred Language	Other Language	
PENDING	Spanish	N/A	
Race	Ethnicity	Marital Status	
White	Hispanic Latino	Divorced	
Emergency Contact Information			
Name		Relationship to Client	
Ines Bernal		Daughter	
Address		Phone Number	
Emergency Contact Address was not provided		786-296-8392	

Part 2: Presenting problem/symptoms
<p>Describe the reason for referral, elaborating on client's presenting problems and chief complaints.</p> <p>Lorenza Gonzalez is a 73-year-old , white, single, Hispanic female, from Cuba who has been struggling with persistent symptoms of depression and anxiety that have profoundly affected her daily life. Despite being under the psychiatric care of Ernesto Guevara, PMHNP at Excellence Care Florida, LLC, and adhering to her prescribed medication regimen, she has not experienced significant improvement, instead she has experienced an increase in her symptoms of depression in the last month mainly because of family conflicts. Due to the enduring nature of her symptoms and limited relief from medication alone, her psychiatrist has recommended that she engage in outpatient mental health treatment, including tailored therapeutic interventions to better manage her symptoms.</p> <p>Lorenza reports feeling deeply depressed and anxious almost every day, primarily stemming from financial hardships and strained family relationships. She feels increasingly distant from her daughter, who is soon to be married, and perceives herself as excluded from her daughter's life. This sense of distancing is exacerbated by her daughter's new relationship; Lorenza states that she remains close to her daughter's previous partner and struggles to accept the change. These familial tensions have led to overwhelming feelings of sadness, nostalgia, and a pervasive lack of interest in activities she once enjoyed.</p> <p>Adding to her distress is an ongoing dispute with a neighbor who frequently complains about her dog to the homeowner's association (HOA). Lorenza fears that these complaints may force her to give up her pet—the one consistent source of comfort and companionship in her life. This situation has intensified her anxiety and contributed to her difficulty sleeping.</p> <p>Her depressive symptoms manifest as anger, angry outbursts, feelings of worthlessness, increased irritability, and profound sadness. She has lost interest in previously enjoyed activities, experiences decreased sociability and often isolates herself. Sleep difficulties, including insomnia and trouble falling asleep, further exacerbate her condition.</p> <p>Lorenza also exhibits symptoms of generalized anxiety disorder. She experiences apprehensiveness, confusion under stress, and physical symptoms such as diarrhea, dizziness, sweating, and shaking. She has difficulty concentrating, feels embarrassed in social settings, and suffers from fear and restlessness.</p> <p>Lorenza rates her depression at 9 out of 10 and her anxiety at 8 out of 10, indicating significant emotional disturbances. Despite these challenges, Lorenza firmly denies any history of suicidal thoughts, plans, or attempts. She does not report experiencing hallucinations or delusional thinking.</p> <p>Lorenza reports that she lives alone, and feels financially unstable and isolated. Her lack of motivation due to depression has led to a diminished interest in recreational activities, and she spends most of her time alone with her dog. Lorenza acknowledges that medication alone has not been sufficient in alleviating her symptoms and expresses a desire to improve her mental health through additional support.</p>

**Part 3: Family History****Childhood & Social History**

(Raised by, siblings, special events in childhood, socio-economic, quality of relationships with caregivers)

Lorenza reports that she was born and raised in rural Cuba with her parents and five siblings. Although the family was humble, her parents prioritized education and created a loving environment. She married at 16 and had two sons but separated due to a toxic relationship. After moving to the U.S., she remarried, had a daughter, and eventually divorced amicably.

Current marital or significant other relationships

Lorenza reports that she is divorced. Currently, she lives alone and relies on Social Security retirement income, Medicaid, Medicare, and food stamps. Lorenza states that she lacks a strong support system at present due to strained relationship with relatives, especially with her daughter.

Part 4: Psychiatric History

Has the client received outpatient mental health treatment in the past? ☒ Yes ☐ No If yes, please specify (when, where, psychiatrist, PCP):

Despite having symptoms since she was young, Lorenza has had steady psychiatric treatment during the last few years. Current psychiatrist is Ernesto Guevara, PMHNP at Excellence Care Florida, LLC.

What was the treatment outcome? (AMA, completion, etc.)

Lorenza indicates that while she experienced some improvements with prior treatment, she continues to have recurrent episodes of depression and anxiety.

Client's perception of treatment outcome

Lorenza recognizes that adhering to her treatment plan is crucial for achieving positive results.

The client's prior inpatient psychiatric treatment

Lorenza denies any history of inpatient psychiatric treatment.

Has the client received previous psychiatric hospitalizations?

☐ Yes ☒ No If yes, please specify (date, where, psychiatrist):

Lorenza reports that she has never been psychiatrically hospitalized.

**Family psychiatric history**

Family Psychiatric History (psychiatric, medical, substance abuse, including parents/siblings and relationship with them)

Father suffered from depression.

Client's current and recent medications

Name of Medication | Dosage and Frequency | Rx by (Prescriber's Name)

Escitalopram 5 mg once daily (AM)

Trazodone 50 mg once daily (at bedtime)

Levothyroxine 137 mcg once daily

Symbicort 160/4.5 inhaler once daily

Allegra 180 mg once daily

Part 5: History of Medical Problems/Diagnoses/Need for history & physical

Does the client have any history of past/current medical problems or diagnoses?

☒ Yes ☐ No If yes, please specify:

Medical Conditions: Hypothyroidism, Asthma

Medical procedures: None reported

Has the client followed up with a physician?

☒ Yes ☐ No If yes, please specify:

Lorenza reports that she has had follow-up with physicians and specialists as needed.

Is the client currently under the care of a physician for your past/current medical problems/diagnoses?

☒ Yes ☐ No If yes, please specify:

Lorenza reports that she has been under the care of a primary care physician (PCP).

History of allergies/need for history & physical

Does the client have any history of allergies to food or medications?

☒ Yes ☐ No If yes, please specify:

Medication: Iodine

Food: Lactose intolerance (causes stomach pain and fatigue)

Has the client followed up with an allergist?

☐ Yes ☒ No If yes, please specify:

Lorenza is not in need of active follow-up with an allergist at present.



BIO-PSYCHOSOCIAL ASSESSMENT (Continued)



Mi Tierra Medical Group Corp.

Case No **1035**

History of addictive behaviors

Does the client have any addictive behaviors? ☐ Yes ☒ No If yes, please specify:

☐ ETOH ☐ Video Games ☐ Gambling ☐ Pornography ☐ Sexual Activities ☐ Drugs

Other
None reported

Has the client received treatment for the above? ☐ Yes ☒ No If yes, please specify (dates, where):

N/A

Does the individual have any functional issues? ☒ Yes ☐ No If Yes, check all that apply:

☐ Bathing ☐ Eating ☐ Grooming ☐ Taking medications as prescribed
☐ Cooking ☐ Getting dressed ☐ House work ☐ Using the bathroom
☐ Doing laundry ☐ Grocery shopping ☒ Making phone calls ☐ Walking

Part 6: Education, vocational, legal status, and religion screening

Education, vocational, or job training

Highest level of education completed Elementary School	Describe any future educational goals N/A	
Employment Status Retired	Comments Lorenza worked at a Winn-Dixie supermarket for 20 years before retiring. She currently	
Name of Employer / Company N/A		
Address N/A		Phone Number N/A

If not currently employed, is the client able to work? ☐ Yes ☒ No Is the client looking for work? ☐ Yes ☒ No

Additional notes about education, vocational goals, or job training

N/A

Does the individual have financial concerns or issues? ☒ Yes ☐ No

Leisure & Recreation

What activities does the client enjoy most (Time with family, Sports/exercise, music, TV, movies hobbies, interests, etc)?

Lorenza states that she enjoys spending time with her dog and considers herself an animal lover.

Client's leisure/recreational activities limitations

Lorenza says that due to her depression and lack of motivation, she currently has little interest in recreational activities.



BIO-PSYCHOSOCIAL ASSESSMENT (Continued)



Mi Tierra Medical Group Corp.

Case No **1035**

School / Education (Children Only)

Is client currently attending school or any educational program? ☐ Yes ☐ No If no, please explain why:

School Name

District

Grade

Address

School Program (Regular, ESE, EBD, ESOL, HHIP (Homebound), Other)

Teacher or Counselor Name

Phone Number

Has client ever experienced difficulties in any of the following areas? (Indicate in what school level: *Pre-School, Elementary, Middle School, High School*)

Academic performance (low grades, failed subjects)

Behavior (misconduct, bullying, suspensions)

Relationship with students, teachers, school staff

Attendance and punctuality, skipping classes

Fail to pass the grade, grade retention

Participation in extracurricular activities

Learning disabilities

Is client involved in any extracurricular activities? ☐ Yes ☒ No If yes, please specify:

Is there any aide, tutor or mentor assigned to the child? ☐ Yes ☒ No If yes, please specify:

Tutor or Mentor Name

Phone Number

Describe client's educational strengths

Describe any school based weaknesses, adjustment and/or educational placement problems



Legal status screening

Select past or current legal problems

☐ Arrests ☐ Jail ☐ Gangs ☐ Conviction ☐ Probation ☐ DUI/DWI ☐ Detention

Other
N/A

Is the client involved in any court-ordered treatment? ☐ Yes ☒ No If yes, please specify (ordered by, offense, length of time):

N/A

Religion & Spirituality

Does the client practice any religion in a particular place or worship?

☒ Yes ☐ No If yes, please specify:

Christian; occasionally attends church.

Does the client have any beliefs or religions that help with their illness?

☒ Yes ☐ No If yes, please specify:

Lorenza states that her faith in Christ has been a source of strength, helping her through difficult times and illnesses.

Part 7: Abuse, neglect, and exploitation assessment

Is the client involved in any physical abuse?

☒ Yes ☐ No If yes, please specify (victim or perpetrator):

Lorenza reports that she suffered physical abuse during her first marriage.

Is the client involved in any emotional abuse?

☒ Yes ☐ No If yes, please specify (victim or perpetrator):

Lorenza reports that she was a victim of emotional abuse during her first marriage.

Is the client involved in any sexual abuse?

☐ Yes ☒ No If yes, please specify (victim or perpetrator):

N/A

Has the client ever been classified as a sexual offender or perpetrator?

☐ Yes ☒ No If yes, please specify:

N/A

Has the client ever witnessed abuse or family violence perpetrator?

☒ Yes ☐ No If yes, please specify (effect on the client):

Lorenza reports that she was a victim of domestic violence during her first marriage which ended in divorce.

**Part 8: Recipient's current and potential strengths & weaknesses****Strengths/Resources** (Talents, Interests, Community Connection, Cultural Identity, etc.)

"Christ is my strength. The love I have for my children, my grandchild, and my pet."

Weaknesses/Challenges (Barriers, Impediments, Limits, etc.)

"I'm deeply disturbed by mistreatment, injustice, and animal cruelty."

Current or history of trauma/traumatic stress

Lorenza reports a history of trauma stemming from being involved in a toxic and abusive relationship with her first husband when she was a young woman. Later, she suffered emotional trauma when she left Cuba when the Mariel boatlift. Currently, she reports emotional trauma due to conflicts in the relationship with her relatives, especially her daughter.

Has the individual ever served in the military? ☐ Yes ☒ No If yes, please specify branch, length of service and type of discharge:

N/A

Part 9: Mental Health Status Examination**General Observations**

Appearance	<input type="checkbox"/> Well Groomed	<input checked="" type="checkbox"/> unkempt	<input type="checkbox"/> Disheveled	<input type="checkbox"/> Malodorous
Build	<input type="checkbox"/> Average	<input type="checkbox"/> Thin	<input checked="" type="checkbox"/> Overweight	<input type="checkbox"/> Obese
Demeanor	<input type="checkbox"/> Cooperative	<input type="checkbox"/> Hostile	<input checked="" type="checkbox"/> Guarded	<input type="checkbox"/> Withdrawn
	<input type="checkbox"/> Preoccupied	<input type="checkbox"/> Demanding	<input type="checkbox"/> Seductive	<input type="checkbox"/> Intermittent
Eye contact	<input type="checkbox"/> Average	<input checked="" type="checkbox"/> Decreased	<input type="checkbox"/> Increased	<input type="checkbox"/> Slow
Activity	<input type="checkbox"/> Average	<input checked="" type="checkbox"/> Decreased	<input type="checkbox"/> Increased	<input type="checkbox"/> Monotone
Speech	<input checked="" type="checkbox"/> Clear	<input type="checkbox"/> Slurred	<input type="checkbox"/> Rapid	
	<input type="checkbox"/> Pressured	<input checked="" type="checkbox"/> Soft	<input type="checkbox"/> Loud	

Comments

Lorenza appears moderately groomed, with an overweight build and a guarded demeanor. Eye contact is decreased, activity level is low, and speech is clear but marked by a soft tone.

**BIO-PSYCHOSOCIAL ASSESSMENT (Continued)**

Mi Tierra Medical Group Corp.

Case No **1035****Thought Content**

Delusions	<input checked="" type="checkbox"/> None Reported	<input type="checkbox"/> Grandiose	<input type="checkbox"/> Persecutory	<input type="checkbox"/> Somatic
	<input type="checkbox"/> Bizarre	<input type="checkbox"/> Nihilist	<input type="checkbox"/> Religious	<input type="checkbox"/> Paranoia
Other	<input type="checkbox"/> None Reported	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Obsessions	<input type="checkbox"/> Compulsions
	<input type="checkbox"/> Phobias	<input type="checkbox"/> Poverty of Content	<input checked="" type="checkbox"/> Anhedonia	<input type="checkbox"/> Thought Insertion
	<input type="checkbox"/> Ideas Of Reference	<input type="checkbox"/> Thought Broadcasting		

Comments

Lorenza expresses feelings of guilt and anhedonia, with no signs of delusions, obsessions, or phobias observed. Thought content appears normal without disturbances.

Thought Process

<input checked="" type="checkbox"/> Logical	<input type="checkbox"/> Flight of Ideas	<input type="checkbox"/> Goal Oriented	<input type="checkbox"/> Circumstantial
<input type="checkbox"/> Incoherent	<input type="checkbox"/> Loose associations	<input type="checkbox"/> Rapid Thoughts	<input type="checkbox"/> Tangential
<input type="checkbox"/> Blocked	<input type="checkbox"/> Derailment	<input checked="" type="checkbox"/> Ruminative	<input checked="" type="checkbox"/> Concrete

Comments

Lorenza demonstrates a logical and concrete thought process with some ruminative tendencies. No signs of derailment, loose associations, or disorganized thinking were observed.

Perception

Hallucinations	<input type="checkbox"/> None Reported	<input type="checkbox"/> Auditory	<input type="checkbox"/> Visual
	<input type="checkbox"/> Gustatory	<input type="checkbox"/> Tactile	<input type="checkbox"/> Olfactory
	<input type="checkbox"/> Illusions	<input type="checkbox"/> Derealization	<input type="checkbox"/> Depersonalization

Comments

No hallucinations were reported by Lorenza.

Mood

<input type="checkbox"/> Euthymic	<input checked="" type="checkbox"/> Anxious	<input type="checkbox"/> Angry
<input type="checkbox"/> Euphoric	<input checked="" type="checkbox"/> Depressed	<input type="checkbox"/> Irritable

Affect

<input type="checkbox"/> Flat	<input type="checkbox"/> Inappropriate	<input type="checkbox"/> Labile	<input type="checkbox"/> Blunted
<input type="checkbox"/> Full	<input checked="" type="checkbox"/> Congruent with Mood	<input type="checkbox"/> Constricted	

Behavior

<input type="checkbox"/> No Behavior Issues	<input type="checkbox"/> Assaultive	<input type="checkbox"/> Resistant
<input type="checkbox"/> Agitated	<input checked="" type="checkbox"/> Restless	<input type="checkbox"/> Hyperactive
<input type="checkbox"/> Intrusive	<input type="checkbox"/> Sleepy	<input type="checkbox"/> Aggressive



BIO-PSYCHOSOCIAL ASSESSMENT (Continued)



Mi Tierra Medical Group Corp.

Case No **1035**

Movement

<input type="checkbox"/> Akathisia	<input type="checkbox"/> Dystonia	<input type="checkbox"/> Tardive Dyskinesia	<input type="checkbox"/> Tics
------------------------------------	-----------------------------------	---	-------------------------------

Comments

Lorenza displays no signs of dystonia, tics, tardive dyskinesia, or akathisia. His movements appear normal and controlled.

Cognition

Impairment of	<input type="checkbox"/> None Reported	<input type="checkbox"/> Orientation	<input type="checkbox"/> Memory
	<input type="checkbox"/> Ability to Abstract	<input checked="" type="checkbox"/> Attention/Concentration	
Intelligence Estimate	<input type="checkbox"/> Mental Retardation <input type="checkbox"/> Above Average	<input type="checkbox"/> Borderline	<input checked="" type="checkbox"/> Average
Impulse control	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Insight	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Poor
Judgment	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Poor

Comments

Lorenza has average intelligence function, with fair judgment and insight. Attention span is somewhat limited, though memory and orientation appear normal.

Risk Assessment

Risk to self	<input checked="" type="checkbox"/> Low	<input type="checkbox"/> medium	<input type="checkbox"/> high	<input type="checkbox"/> chronic	Safety Plan Reviewed:
Risk to others	<input checked="" type="checkbox"/> Low	<input type="checkbox"/> medium	<input type="checkbox"/> high	<input type="checkbox"/> chronic	<input checked="" type="radio"/> Yes <input type="radio"/> No

History of suicide attempts, plans, and thoughts:

Lorenza adamantly and convincingly denies any history of death wishes, suicidal/homicidal ideations, plans, intentions or self-injurious behaviors.

Suicide Risk Factors

- | | | |
|--|---|--|
| <input type="checkbox"/> Prior suicide attempts | <input checked="" type="checkbox"/> Isolation | <input checked="" type="checkbox"/> Victim of physical or sexual abuse |
| <input type="checkbox"/> Rational thinking loss | <input type="checkbox"/> Family history of suicide | <input type="checkbox"/> Appetite disturbances, bulimia, anorexia |
| <input type="checkbox"/> Organized plan or serious attempt | <input type="checkbox"/> Anniversary of important loss | <input checked="" type="checkbox"/> Loss of significant relationship |
| <input checked="" type="checkbox"/> No social support | <input type="checkbox"/> Impulsivity | <input type="checkbox"/> Decline in physical health |
| <input type="checkbox"/> Sickness, chronic disease | <input type="checkbox"/> Sex (male) | <input type="checkbox"/> Legal issues |
| <input checked="" type="checkbox"/> Psychiatric care | <input checked="" type="checkbox"/> Depression/Hopelessness | <input type="checkbox"/> Excessive alcohol or drug use |
| <input type="checkbox"/> Psychosis, organic brain syndrome | <input checked="" type="checkbox"/> Family violence | |

Risk Reduction Factors

- | | | |
|--|---|---|
| <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Living with another person, especially a | <input type="checkbox"/> Positive social support |
| <input type="checkbox"/> Responsible for children of their own | <input checked="" type="checkbox"/> Sense of responsibility to family | <input checked="" type="checkbox"/> Positive therapeutic relationship |
| <input type="checkbox"/> Employed | <input checked="" type="checkbox"/> Catholicism or other religion of choice | |

**Part 10: Summary & Recommendations****Diagnostic Impression**

Primary Diagnosis (ICD-10 / DSM-V)

F33.1	Major depressive disorder, recurrent, moderate
Code	Descriptor
F41.1	Generalized anxiety disorder
Code	Descriptor
G47.00	Insomnia, unspecified
Code	Descriptor

Preliminary Discharge Plan

Lorenza will be ready for discharge from the outpatient mental health program upon achieving her treatment goals. These goals include managing her depressive symptoms by engaging in activities that enhance her mood and motivation, improving her anxiety management using coping strategies and achieving better sleep patterns, and enhancing her social support by establishing meaningful relationships and increasing participation in social activities. Also, Lorenza will improve her relationship with her daughter by effectively managing conflicts and fostering healthier family interactions. She will process past traumas, reducing their impact on her current emotional well-being, and demonstrate increased self-esteem and independence by engaging in independent activities and showing greater confidence. Discharge may also be considered if Lorenza is unable to maintain regular communication with the treatment team, chooses to discontinue treatment, or requires more specialized care.

Integrated Summary

Lorenza is a 73-year-old Hispanic woman who has struggled with persistent depressive and anxiety symptoms, impacting her daily functioning and quality of life. Originally from Cuba, she has lived in the United States for over 40 years and is a U.S. citizen. Lorenza reports feeling emotionally burdened by family-related issues, particularly her strained relationship with her daughter, who is soon to be married. She feels excluded from her daughter's life, especially with her daughter's new relationship, and finds herself longing for the close connection they once shared. Additionally, she experiences significant distress due to ongoing disputes with a neighbor over her beloved dog, which she fears may lead to her losing this vital source of companionship.

Lorenza's mental health history reveals unresolved trauma from past experiences. Her depressive symptoms manifest as feelings of sadness, isolation, low motivation, irritability, and difficulty enjoying activities she previously found meaningful. She struggles with insomnia and often finds herself feeling overwhelmed by a sense of worthlessness. Her anxiety symptoms include apprehensiveness, physical manifestations like dizziness and sweating, difficulty concentrating, and social discomfort. Despite her challenges, Lorenza is motivated to engage in outpatient mental health treatment and has expressed a clear desire to improve her emotional well-being and strengthen her relationships.

Lorenza's current treatment plan recommendations involve Psychosocial Rehabilitation (PSR) and Individual Therapy. PSR sessions focus on managing her depressive symptoms, enhancing social skills, building a support network, and improving her ability to manage anxiety. Through these sessions, she is learning strategies to re-engage in enjoyable activities, address her depression and anxiety symptoms, and develop practical skills to handle family dynamics and conflict more effectively. Individual therapy sessions are centered on processing past traumas, improving self-esteem, and building resilience. The therapeutic approach includes exploring unresolved emotional pain, learning effective coping strategies, and developing a stronger sense of autonomy and confidence.

Her progress will be regularly monitored, with adjustments to the treatment plan as needed. The primary goal of Lorenza's treatment is to provide her with the tools necessary to manage her symptoms, improve her social interactions, and regain a sense of independence.

► **Note:** The integrated summary is written to evaluate, integrate, and interpret from a broad perspective, the history and assessment information collected.

Florida Medicaid Community Behavioral Health Services And Limitations Handbook, March 2014, pp. 29 (Assessment Services)



BIO-PSYCHOSOCIAL ASSESSMENT (Continued)



Mi Tierra Medical Group Corp.

Case No **1035**

Recommended Services

- | | | |
|---|--|--|
| <input type="checkbox"/> Psychiatric Evaluation | <input type="checkbox"/> Medical/Psychiatric Care | <input type="checkbox"/> Medication Management |
| <input type="checkbox"/> Psychological | <input type="checkbox"/> Neurological Exam | <input checked="" type="checkbox"/> Individual Therapy |
| <input type="checkbox"/> Physical Exam | <input type="checkbox"/> Group Therapy | <input type="checkbox"/> Family Therapy |
| <input checked="" type="checkbox"/> Psychosocial Rehabilitation | <input type="checkbox"/> Substance Abuse Treatment | <input type="checkbox"/> Baker Act |

Other
N/A

SIGNATURES

This Therapist has completed an interview with the client and has made appropriate treatment recommendations based on the interaction.

Ostery Matheu Valdes

Therapist's Print Name

MSMH

Credentials

Signature

11/1/2024

Date

Reviewed and Approved by:

I concur with the diagnosis and treatment recommendations

Supervisor's Print Name

Credentials

Signature

Date