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PSYCHOLOGICAL EVALUATION
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NAME: Alexis Emerald SEX: M BIRTHDATE: 02/17/2011 AGE: 11 - 1

SCHOOL: Homeschool GRADE: 5

PARENTS: William Emerald and Julie Aquamarine

DATE OF EVALUATION: 03/15/2022

PSYCHOLOGIST: Gary M. Eisenberg, Ph.D.

REASON FOR REFERRAL:

Alexis has always been anxious. Recently, it has worsened as evidenced by bleeding hands due to repeated washing. Other times he simply overreacts. There was some concern that he may be on the autism spectrum.

BACKGROUND:

Alexis Emerald is the youngest child of William Emerald and Julie Aquamarine. His parents are married and live together with their son and daughter in Happytown, Colorado.

By way of family history, father reports some anxiety including a dislike of schedule changes. He tends to be passive in social situations. Mother reports that she is more outgoing but experienced OCD symptoms as a child.

Alexis was born slightly blue, possibly due to a knot in the cord, yet his birth weight was large at 11 lbs., 2 oz.

As a baby he was described as a poor sleeper yet rarely fussy. He wanted to be with people and enjoyed laughing and relating. For his first several years of life he had to do things on mom's lap. For instance, he would play only if sitting on her. In other words, he was quite clingy to mom, often needing her 24/7. Occasionally, sister substituted as the mom. There is clear evidence of shared enjoyment. Alexis had not developed any friendships by age two. He rarely engaged in peer play. In fact, interest in playing with peers has only started recently.

Alexis is the kind of child who is capable of entertaining himself with his own imagination. He also has enjoyed taking things apart and turning pages. A careful review of history indicated that

there is no real preoccupation, but he does love to talk about the video game, Zelda, nonstop. He could not be punished by timeout because he enjoyed being alone. Parents remember that Alexis was easily embarrassed as a young child, for instance during potty training. He also hated practicing reading because mother had to watch. Early on parents noted a low frustration tolerance. Alexis might have screamed if he could not achieve a particular goal.

Alexis is homeschooled and in fact has never been to a brick-and-mortar elementary school. He does tend to give up easily on difficult academic tasks, often assuming he cannot do them.

Outside of the classroom Alexis enjoys the outdoors, Star Wars, and makes stop-motion movies with Bristlecomb blox. He enjoys a particular video game and has an active imagination. He participates in martial arts four times per week plus aerobics twice per week.

Alexis has one close friend with whom he enjoys play dates and now one sleepover. One trouble with friends is that he dislikes things being touched. However, the dog seems to be his greatest nemesis when it comes to touching things and sensory issues. Sometimes he overreacts to the dog's smell or slobber.

Sometimes Alexis hyperfocuses on his own needs. For instance, he has to do his teeth in order. Mother suggested that sometimes he is "blinded by what he wants to do."

TESTS ADMINISTERED:

Autism Diagnostic Observation Schedule -- 2, Module 3

Achenbach Child Behavior Checklist

Social Responsiveness Scale – 2

Revised Children's Manifest Anxiety Scale – 2

Youth Inventory – 4, Self-Report

Woodcock-Johnson IV, Tests Of Achievement (limited to math screening only)

Woodcock-Johnson IV, Tests Of Cognitive Ability (limited to math screening only)

Yale-Brown Obsessive Compulsive Scale

TEST RESULTS:

THE ACHENBACH CHILD BEHAVIOR CHECKLIST	
Test	T-Score
Anxiety/Depression	86
Withdrawal/Depression	72
Somatic Complaints	70
Social Problems	69
Thought Problems	83
Attention Problems	74
Rule-Breaking Behavior	70
Aggressive Behavior	76

DISCUSSION OF TEST RESULTS:

The Autism Diagnostic Observation Schedule – 2 is considered the gold standard of autism testing. The Autism Diagnostic Observation Schedule – 2 quantifies social interaction. Much of it involves play with action figures or the description of presumably exciting picture stories.

One ADOS task is to interact with action figures. Alexis was able to do so quite well with an appropriate laugh that matched his face. Another ADOS task is looking at a map together. Alexis initiated two travel stories and made good reciprocal conversation about other trips. The psychologist invents a “plight” he struggled with during a trip. This is done intentionally to check the child’s empathic reaction. Alexis indeed reacted sympathetically and appropriately. Empathy was shown throughout the ADOS exam, including when explaining some of the cartoon characters. Alexis is generally aware of his own emotions and was able to describe what his body feels like when he is either anxious or sad. Alexis was well aware of the differences of friends and acquaintances. Given his good abilities with joint attention, reciprocal conversation, empathy, and the ability to process his own emotions, Alexis is absolutely **not** on the autism spectrum.

The psychological aspect of this evaluation includes the Achenbach Child Behavior Checklist, administered to mother. Here she rated her youngster on 112 different items and the psychologist subsequently classifies them into diagnostic categories.

Alexis was rated very high in anxiety including multiple fears of underperforming and general nervousness. Parents were also concerned about attention in terms of not sitting still and daydreaming. Rule breaking and aggressive behavior was only defined at home where he can be disobedient and demand a lot of attention. Note, one of the principal concerns is that he simply gives up before he tries.

The Sentence Completion Test was administered to better understand Alexis's underlying feelings. There he reported that he has been anxious "all of his life," speaking in front of people. Alexis can get flooded with his own emotions especially if he is uncomfortable or angry. He pretty much dislikes that he has bad thoughts that include curse words and taking inappropriate actions. Sometimes he wishes he could go back in time and change his remarks. Alexis knows that he might get angry when things do not go on schedule or in order. He can be very uncomfortable with his own anger. For instance, he likes to eat in order.

The Youth Inventory was used as a structure to prompt additional responses about his feelings. There, Alexis reported that he has trouble stopping himself from worrying and that sometimes he is quite concerned about going out in public or thunderstorms. He knows he overwashes his hands. Alexis also worries about his health, whether he is exercising enough and eating correctly. Alexis reports that sometimes he does not have the energy to do things.

Alexis completed the Revised Children's Manifest Anxiety – 2. Here he rates himself on 49 different items. He considered himself to be a worrier and one that is afraid to talk in class. He knows he worries about what people think about him but would like to improve that. He also knows he can get easily distracted when doing schoolwork by thinking about upcoming events. Hence, there is obvious concern in the area of anxiety. In addition, Alexis's scores reached clinical significance in the area of worry.

Next, Alexis received the Yale-Brown Obsessive Compulsive Scale. He does have concerns in the area of symmetry, which is the category under which his need to get things done in order falls. He reports being quite tense if schoolwork or his morning routine do not go in order.

Alexis is very attuned to sensory issues, and they often cause anxiety. After touching the dog, he really needs to wash his hands or even after touching something that the dog touched. Please note that even in the office during testing Alexis was attuned to very small sensory stimuli such as the smell of the doctor's copying machine when working. He was sensitive to any minute noise in the environment such as hearing a texting notification in another room.

Alexis has other compulsions including the fact that he is a box hoarder and must arrange them in a certain order. His scores on the Yale Brown OC Scale yielded a total of 8. This officially falls at a level of mild OCD.

SUMMARY:

Alexis Emerald is an 11-year-old fifth grader referred due to lifelong anxiety and possibly an autism diagnosis. Of greater concern is his pessimism, in that he often gives up on completing

his homework, assuming he will struggle. Alexis is a very creative thinker, but one who often “stays in his head.” This means he may overfocus on his own thoughts or needs without attention to others. Often, Alexis is focusing on the order in which he wants to complete things. He can be quite tense if things do not go as planned.

Alexis’s early history is consistent with anxiety. He literally had to physically sit on his mom (feet) to do any activity including play and social interaction.

The Autism Diagnostic Observation Schedule -- 2 was administered to evaluate his personality including whether or not he is on the autism spectrum. During the ADOS Alexis exhibited excellent empathy as well as good reciprocal conversation. He is well-aware of his own emotions. He is capable of good social intercourse, including appropriate laughing and facial expressions. He is absolutely not on the autism spectrum.

Reports were all very consistent about anxiety. Mother still sees him as crying occasionally with great fears of underperforming and a lot of self-consciousness. Sometimes he cannot get his mind off of certain thoughts.

When annoyed, Alexis struggles with his thoughts being flooded. He is very uncomfortable that his mind may generate a curse word or the idea of some type of retribution. Although he would never act these things out, he does feel guilty of even thinking of them.

Alexis has multiple compulsions including having to complete his schoolwork and his morning chores in a certain order. He is also highly reactive to sensory stimuli. Even in the office he smelled very subtle smells and reacted to distant sounds. This is a child who has to wash his hands after coming in contact with something that the dog may have touched. At times, he overwashes his hands so much that they bleed. With these multiple compulsions and some obsessions, the final diagnosis for Alexis is Obsessive Compulsive Disorder.

DIAGNOSES:

DSM 5: Obsessive Compulsive Disorder, mild
Generalized Anxiety Disorder
Social Anxiety Disorder

RECOMMENDATIONS:

1. Multiple bibliographical resources were given to the parents. These included books for both Alexis and parents to read about anxiety. It is recommended that Alexis and his mother spend at least a half hour per week discussing how the students portrayed in the books may be similar or dissimilar to Alexis. The books also give therapeutic recommendations.
2. Use of the Incredible Five Point Scale to help Alexis read his body. It is hoped that if Alexis becomes more insightful about understanding when his body is anxious that he will then be able to soothe himself. Alexis must work on self-regulation. One means of

doing that is brief and intense exercise.

3. Given the severity of the anxiety and its impact on his performance and self-esteem, this psychologist is strongly recommending a psychopharmacological intervention. Parents too have had personal experience with these medications. The physician should take this report as well as parent history into account when prescribing.
4. Alexis's anxiety will ultimately be reduced if he learns to handle the public and society. After his anxiety is stabilized this next year, this psychologist would strongly recommend he begin attending school full time.
5. After the family has made some progress with the above, Alexis will be helped by individual therapy.
6. The following are recommended to be read together, one day/week, one book at a time.
 - a. What to do when you Worry too much by Dawn Huebner
 - b. CBT workbook for kids; Heather Davidson
 - c. Stress relief for kids, Taming your dragon by Marti Belkamp
 - d. Helping children build self-esteem, a Photocopiable Activities book by Deborah Plummer,
 - e. The Anxiety Workbook for kids; Robin Alter PhD. Ideas for parents to do with child.
 - f. **PARENTS BOOKS BELOW**
 - g. Anxiety Free Kids; Bonnie Zucker, Psy.D. (PARENT BOOKS)
 - h. Helping Your Anxious Child Second Edition; Ronald M. Rapee, Ph.D., Ann Wignall, D. Psych, Susan H. Spence, Ph.D., Vanessa Cobham, Ph.D., & Heidi Lyneham, Ph.D.
 - i. Anxiety free kids by Bonnie Zucker



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cc: Dr. Feelgood Pediatrics
Attachment: (1) Incredible Five Point Scale

INCREDIBLE FIVE POINT SCALE

RATING	Body looks	Feels like	I can try to
 5		OUT OF CONTROL	
 4		STRESSED	
 3		NERVOUS	
 2		YUCKY	
	CALM		



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HAPPY