

THE WETC PSYCHOLOGY NEWSLETTER

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"Find the Truth, Tell the Story"

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Additional situations when you should get an Apricot™

Psych reports can be difficult to understand for anyone who has not had formal training in psychology, psychiatry or some other area of the mental health field. Understandably, it can be challenging for attorneys to identify the substantial and fatal flaws in medical legal psych reports. Not only can it be challenging to identify the substantial flaws in a psych report, developing questions designed to attack those flaws on cross-examination of psych doctors when their reports raise multiple esoteric issues can seem nearly impossible for attorneys. It is situations such as these when you need an Apricot™.

Apricots™ are work-product, written reports that provide information about a psych report's flaws with citations to the psych literature. Apricots™ use easy-to-understand terminology in describing the psych report's flaws and can also provide a list of simple questions to use during cross-examination of the psych doctor. Other uses for an Apricot™ are disputing a treating doctor's liens and/or drafting a Trial Brief for the court.

In May and June, 2018, I discussed four situations when you should consider getting an Apricot™. Those four situations are:

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"An Apricot™ is a written-analysis of a psych report that you have that may not be in your favor. I find every flaw in the report, explain why they are flaws, and provide documentation from the published psychological and psychiatric literature that supports the contention that these flaws exist."

Situation #1

When the doctor's account of the patient's symptoms or complaints does not contain a complete jargon free history of the qualitative nature of the symptoms or clear information about their frequency, onset, duration when present, intensity, or course over time.

Situation #2

When the doctor's report of their Mental Status Examination does not contain clear observational descriptions of the patient's behavior during the doctor's face-to-face evaluation that supports their diagnosis.

Situation #3

When the doctor's report of their Mental Status Examination contains statements about the patient's complaints.

Situation #4

When the doctor's report of their Mental Status Examination contains discrepancies between the doctor's description of their observations and their report of the patient's complaints.

This month's newsletter discusses two additional situations when you should get an Apricot™.

Situation #5

When the doctor provides a diagnosis, such as a Major Depressive Disorder, but declines to state the required modifiers or specifiers for that diagnosis.

For example, when the psych doctor has diagnosed a Major Depressive Disorder, it is imperative to be sure the diagnosis is complete. In this regard, the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM) indicates that in order to diagnose any form of a Major Depressive Disorder correctly it is necessary to specify whether the disorder has been of the Single Episode or the Recurrent variety. Further, it is necessary to specify the severity of the disorder as well as provide numerical diagnostic codes to unambiguously identify the specific Major Depressive Disorder the doctor wishes to diagnose. When you see that the doctor has provided an incomplete diagnosis you should get an Apricot™ that will help you identify the major errors and provide you with questions to ask the doctor to expose the incompleteness of the diagnosis.

Situation #6

When the doctor's report of their Mental Status Examination lacks a description of objective techniques the doctor used during their evaluation to measure the patient's memory functions.

Individuals with psychopathology frequently exhibit dysfunction in their memory and other cognitive functions. During the course of a Mental Status Examination, it is standard procedure for the evaluator to measure an individual's memory. An individual's memory can be easily measured with a variety of objective techniques that yield easily reported upon observational data. For example, doctors typically asks the patient to recall such verifiable personal information as their driver's license number and/or their Social Security Number to measure long-term or remote memory. A discussion of similar tasks should be in the doctor's report of their Mental Status Examination describing the doctor's observations of the individual's recent memory. When you detect an absence of a discussion of the specific memory tests, along with the data obtained, you should get an Apricot™.

In summary, Apricots™ can be useful to attorneys and insurance adjusters who have psych reports on their hands that contain substantial flaws. Attorneys should get an Apricot™ to assist them in cross-examining the psych doctor, drafting a Trial Brief, and/or disputing liens for psychological and/or psychiatric treatment. For more information about Apricots™ and understanding psych reports, give us a call (844) 444-8898 and visit our website www.drleckartwetc.com

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(e-mail us at DrLeckartWETC@gmail.com
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This is the one-hundred fourteenth of a series of monthly newsletters aimed at providing information about pre-deposition/pre-trial consultations, psychological evaluations and treatment that may be of interest to attorneys and insurance adjusters working in the areas of workers' compensation and personal injury. If you have not received some or all of our past newsletters, and would like copies, send us an email requesting the newsletter(s) that you would like forwarded to you.