

THE WETC PSYCHOLOGY NEWSLETTER

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"Find the Truth, Tell the Story"

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Situations when you should get an Apricot™

In May, 2018, I wrote a newsletter describing two situations when you should get an Apricot™. An Apricot™ is a written report that describes the major flaws in a psych report, using easy-to-understand terminology and includes citations to psych literature. An Apricot™ can be used to prepare a Trial Brief for the court. I can also include a list of simple questions to use in taking a psych doctor's deposition or trial testimony. Most recently, Apricots™ have been used to dispute a treating doctor's liens. As stated in my May, 2018 newsletter, Apricots™ are work-product privileged reports that are not subject to discovery and can be used in any jurisdiction in the United States or abroad. Also as discussed in my May, 2018 newsletter, two situations when you should get an Apricot™ are:

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, their 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.

Browse Dr. Leckart's Book at
www.DrLeckartWETC.com

"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."

This newsletter provides a discussion of some additional situations when you should get an Apricot™.

Situation #3

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

A Mental Status Examination produces a set of observations of the patient that are made by the doctor under reasonably controlled conditions, employing a relatively standard set of examining techniques and questions. Unfortunately, having read over ten thousand psych reports over the course of my career, I have found that some doctors find it necessary to include a description of the patient's complaints or feelings in their report of their Mental Status Examination. Clearly, including statements that describe the patient's complaints or feelings has no place in a Mental Status Examination that is reserved for a description of the doctor's observations of the patient's behaviors.

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.

For example, in reading the doctor's history of the patient's current symptoms or complaints, you may find that the doctor reported the patient complained of "forgetfulness." Clearly, "forgetfulness" is a complaint of a memory problem. Then, in the same report, in reading the Mental Status Examination section, you may find that the doctor described the patient's memory as "intact" and stated nothing further with regard to the patient's memory. Quite obviously, this situation would be considered an inconsistency between the doctor's report of their observations and the patient's complaints. An inconsistency such as this is often confusing and decreases the report's credibility.

Rest assured, that when you encounter a psych report that contains inconsistencies, an MSE riddled with a discussion of the patient's complaints, an incomplete history, and/or an absence of the doctor's observations of the patient's behaviors, you can get an Apricot™ to assist with questioning the doctor and/or shedding light on the report's errors for the court. You can get more information about Apricots™ and how to obtain one for yourself by visiting our website, www.DrLeckartWETC.com or calling (844) 444-8898.

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This is the one-hundred thirteenth 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.