

CASE SUMMARY

1. CASE BACKGROUND

- Presenting for “second opinion” on behavioral concerns, specifically, increasing shyness, lack of engagement in social activities, stress about her body changes for 6 months.
- She has been referred and started mental health therapy for anxiety, concerns for depression, but parents concerned that it isn’t helping and wonder if she has Autism.
- Historians: Patient, Mother and Father
- Language: Spanish (parents), English (patient)

2. PARENTS HAVE NOTICED

- Concerned and stressed about pubertal changes
- Washes and bathes frequently
- Wearing larger clothing and sweatshirts, even when it is hot
- Seems anxious about going to school
- Fear “something is going to happen”
- Continues to like her own activities, particularly drawing
- No longer engaging with familiar family members

3. PATIENT SAYS

- She is worried about what might happen in the future
- Worried about “things I need to do the next day”
- Says she is shy, but would like to improve, but doesn’t know how
- Wants to keep herself clean as she grows
- Likes drawing - mostly animals
- Has one friend at school, female
- Wants to go to school
- Enjoys math

4. TEACHERS REPORTS TO PARENTS

- “Reserved, quiet” “in her own world”
- Answers all questions appropriately when asked
- Passing academic work
- More difficulty with language arts, specifically spelling and creative writing assignments
- Few social interactions observed
- No bullying

5. PAST MEDICAL HISTORY

- Full-term, no complications, obesity, allergic rhinitis
- No known neonatal infections, seizures, head trauma, lead exposure

6. FAMILY HISTORY

- Mother – postpartum depression, grief
- Father – no known issues
- Paternal half-brother (19 y/o): Schizophrenia
- Paternal half-brother (24 y/o): Autism Spectrum

7. SOCIAL

- Born in San Diego
- Lives with mother, father only at this time
- Travels back and forth to Mexico
- Family immigrated from Mexico
- Older ½ brothers (father's first wife) used to live with family but have moved out.

8. DEVELOPMENT

- Speech delay/disorder with speech services until about 3 years
- Mother has always helped her stay on task as she gets distracted by drawing and organizing things in her workspace.

9. EARLY CHILDHOOD BEHAVIORS

- Picky eating - sensitive to things touching or mixing
- Relationships - cousins as friends
- Activities - mostly inside play, always interested in papers - sorting and stacking, coloring, and drawing
- No history of IEP, 504 plan, or other school-based therapy or support

10. REVIEW OF SYSTEMS

- No seizure, no "spacing out", no injuries
- No sleep changes, no appetite changes
- No self-harm, no suicide ideations or attempt

11. PHYSICAL EXAM

- BMI > 95th percentile
- GAD-7 score = 0; PHQ-9 Score = 0
- Gen: well groomed, school uniform, large puffy jacket, non-dysmorphic
- HEENT, Chest, Abdomen, Skin all WNL, SMR 3 wearing a bra
- Mood described as "good" affect flat
- Initially no eye contact, then fixed eye contact on provider, holding eye contact for long periods of time, not referencing parents when they speak.
- Tapping fingers together, repetitive, rest of body is kept very still with shoulders hunched,
- While speaking with family, patient took a book and used her finger to trace lines of text, repetitively
- Denies hearing or seeing things that she knows are not real.
- Denies SI/HI.
- Able to recall what family had for dinner the night before, activities they did the preceding weekend.
- A&O x3, CN II-XII grossly intact, 5/5 strength upper and lower extremities, sensation intact to light touch in bilateral upper and lower extremities, reflexes 2+ bilaterally in biceps, BR, triceps, patella, and Achilles with no ankle clonus, normal finger-to-nose, and rapid alternating hand movements, neg Romberg, normal gait