Name: _	Date:	Period:						
Performance Assessment: Case Conceptualization "The Tell-Tale Heart"								
Background Information: The narrator has been arrested for the murder of the old man. Prior to his trial, his defense attorney insisted that he see you, the top psychiatrist in the tri-county area. The narrator is hoping to get out of the death penalty by way of the insanity plea.								
Step One: As you listen to your new client [re]tell his story, take notes of his psychotic behaviors so as to better be able to diagnose his disorder(s). Step Two: Compare your notes to the diagnostic criteria listed in the <i>Disorders Chart</i> . Step Three: If applicable, diagnose your client with the appropriate disorder(s). Step Four: Write a letter outlining your diagnosis (or lack thereof) to the judge overseeing this case. You will also need to be available to testify on the account of your client.								
	This psychotic behavior	indicates this disorder						
7. H.	e obsessed over the "Uniture Eye"— it haunted him had he killed the man over it. (couldn't while he slept-eye wasclose	a OCD						
2.								

3.

4.

5.

6.

7.

8.

9.

10.	
cus Standards: 2.8.1 Cite the textual evidence that most strongly supports an analysis of what the text says plicitly as well as inferences drawn from the text.	
YPERLINK "http://www.corestandards.org/ELA-Literacy/RI/8/3/"RI.8.3 Analyze how a text akes connections among and distinctions between individuals, ideas, or events (e.g., through imparisons, analogies, or categories). After meeting with your client on several occasions at the Baltimore City Correctional Facility, I has	ve diagnosed nim with
on the grounds of the following:	

I am eager to testify to the	ese results on behalf of our client at the upcoming trial	
Sincerely,		
Name:	Focus Standard: W.8.1 Write arguments to support claim	ms with clear reasons and relevant evidence

Case conceptuanzation. Disoraci chart

Schizophrenia (page 99)	Antisocial Personality Disorder (page 659)
 A. Diagnostic Criteria (2 or more of the following): Delusions Hallucinations Disorganized speech (e.g., frequent derailment or incoherence). Grossly disorganized or catatonic behavior Negative symptoms (i.e., diminished emotional expression). B. Level of functioning in one or more major areas, such as work, interpersonal relations, or self-care is markedly below what would have been considered "normal" for patient prior to onset of the disturbance. C. The disturbance is not attributable to the physiological effects of a substance (e.g., a drug of abuse, medication) or another medical condition. 	 A. A pervasive pattern of disregard for and violation of the rights of others, occurring since age 15 years, as indicated by three (or more) of the following: Failure to conform to social norms with respect to lawful behaviors, as indicated by repeatedly performing acts that are grounds for arrest. Deceitfulness, as indicated by repeated lying, use of aliases, or conning others for personal profit or pleasure. Impulsivity or failure to plan ahead. Irritability or aggressiveness, as indicated by repeated physical fights/assaults. Reckless disregard for safety of self or others. Lack of remorse, as indicated by being indifferent to or rationalizing hurt, mistreated, or stolen from another. B. The individual is at least 18 years of age.
General Anxiety Disorder (page 222)	Obsessive-Compulsive Disorder (page 237)

- A. Excessive anxiety and worry, occurring for at least 6 months, about a number of events or activities (such as work, school, or performance).
- B. The individual finds it difficult to control the worry.
- C. The anxiety and worry are associated with three (or more) of the following 6 symptoms:
 - 1. Restlessness or feeling keyed up/on edge
 - 2. Being easily fatigued
 - 3. Difficulty concentrating or mind going blank.
 - 4. Irritability.
 - 5. Muscle tension
 - 6. Sleep disturbance
- D. The anxiety, worry, or physical symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- **A.** The disturbance is not attributable to the physiological effects of a substance (e.g., a drug of abuse, medication) or another medical condition.

Panic Attack Specifier (page 214):

- **1.** Palpitations, pounding heart, or accelerated heart rate.
- 2. Sweating.
- 3. Trembling or shaking.
- **4.** Sensations of shortness of breath.
- 5. Chest pain or discomfort.
- **6.** Nausea or abdominal distress.
- **7.** Feeling dizzy, unsteady, light-headed, or faint.
- 8. Chills or heat sensations.
- **9.** Derealization (feelings of unreality) or depersonalization (being detached from oneself).
- **10.** Fear of losing control or "going crazy".

- A. Presence of obsessions or compulsions, or both:Obsessions are defined by:
 - Recurrent and persistent thoughts, urges, or images that are experienced as intrusive and unwanted and cause anxiety/distress.
 - 2. The individual attempts to ignore or suppress such thoughts, urges, or images with some other thought or action (by performing a compulsion).

Compulsions are defined by:

- Repetitive behaviors (e.g., hand washing, ordering, checking) or mental acts (e.g., praying, counting, repeating words silently) that the individual feels driven to perform in response to an obsession or according to rules that must be applied rigidly.
- 2. The behaviors or mental acts are aimed at preventing or reducing anxiety or preventing some dreaded event or situation
- B. The obsessions or compulsions are time consuming.
- C. The obsessive-compulsive symptoms are not attributable to the physiological effects of a substance (e.g., a drug of abuse, medication) or another medical condition.

Bipolar I with Psychotic Features (page 123-4, 152)

For a diagnosis of bipolar I disorder, it is necessary to meet the following criteria for a manic episode.

- A. A distinct period of abnormally and persistently elevated, expansive, or irritable mood and abnormally and persistently increased goal-directed activity or energy, lasting at least one week and present most of the day, nearly every day.
- B. During the period of mood disturbance and increased energy or activity, 3 (or more) of the following symptoms are present to a significant degree and represent a noticeable change from usual behavior:
 - 1. Inflated self-esteem or grandiosity
 - 2. Decreased need for sleep
 - 3. More talkative than usual or pressure to keep talking
 - 4. Flight of ideas or subjective ideas that thoughts are racing
 - 5. Distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli) as reported or observed.
 - 6. Increase in goal-directed activity
 - 7. Excessive involvement in activities that have high potential for painful consequences
- C. The mood disturbance is sufficiently severe to necessitate hospitalization to prevent har m to self or others.
- D. The episode is not attributable to the physiological effects of a substance (e.g., a drug of abuse, medication) or another medical condition.
- E. With Psychotic Features: delusions or hallucinations are present at any time in the manic episode.

American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders: DSM-5. 5th ed. Arlington, VA: American Psychiatric Association, 2013. Print.



ent Name:	Date:	

Check	Requirement	Limited (1)	Some (2)	Considerable (3)	To a High Degree (4)	Total Points Earned
	Notes on the psychotic behaviors of the narrator are accurate and text-based .					
	Student chose accurate disorders for each note taken on the narrator's psychotic behavior.					
	Student wrote a letter to the defense attorney that identifies the diagnosis of the mental illness the narrator suffers.					
	Student describes how he/she came to the diagnosis using evidence of psychotic behaviors.					
	Spelling, grammar, usage and mechanics don't prevent the reader from understanding the work.					



Student Name: Date:

Performance Assessment: Case Conceptualization "The Tell-Tale Heart"

Check	Requirement	Limited (1)	Some (2)	Considerable (3)	To a High Degree (4)	Total Points Earned
	Notes on the psychotic behaviors of the narrator are accurate and text-based .					
	Student chose accurate disorders for each note taken on the narrator's psychotic behavior.					
	Student wrote a letter to the defense attorney that identifies the diagnosis of the mental illness the narrator suffers.					
	Student describes how he/she came to the diagnosis using evidence of psychotic behaviors.					

Spelling, grammar, usage and mechanics don't prevent the reader from understanding the work.			
prevent the redder from understanding the work.			

