

About Mr. Jeremiah Smith

Mr. Smith is an 85-year-old, right-handed male who was referred for an evaluation of decision making capacity. He self-identified as being a "Indian," heterosexual, widowed, and retired.

Information provided by Mr. Smith and his daughter (Mary, age 60): Mr. Smith has lived in New Mexico with his daughter Susan (age 52) for the past 5 years. One year ago, at Susan's request, Mr. Smith was seen by a physician in New Mexico for an evaluation. The physician (MD) did a brief office exam and diagnosed Mr. Smith with "dementia". After this diagnosis was made, Susan took over control of Mr. Smith's finances and has withdrawn approximately \$55,000 from Mr. Smith's account in the past year. It was not clear from the information provided whether a legal power of attorney for finances was activated or if Susan took over the accounts informally. Mr. Smith said that Susan was a co-signer on the accounts in the past but did not interfere in Mr. Smith's management of his financial affairs until Mr. Smith was diagnosed with "dementia". Susan has also sold some of Mr. Smith's personal items and retained the money from these sales. Mr. Smith does not feel the diagnosis of dementia is correct and would like to resume control over his financial matters.

The incident that initiated the diagnosis of dementia one year ago was as follows: Mr. Smith said he saw the shadow of a person walking in the house and believed it was an "Angel". Mr. Smith's is an American Indian (he reported "half-blood, Suquamish Nation") and was raised with a belief in spirits and other types of "visions" and was not upset or troubled by his vision of the "Angel". He said, "My mother was Indian, my father was German."

Several days later he had a syncopal episode ("I blacked out") and fell while walking out to the backyard. This was an unwitnessed fall and it is not clear how long Mr. Smith was unconscious but it was likely very brief (less than 5 minutes) based on his recall of the event. He thought that he felt someone trying to help his up and said he believed this was also the "Angel". He was taken to the emergency room by his daughter and had a laboratory work-up, that included thyroid functions, complete blood count, and B12 and this was entirely normal. There was no indication of any type of infection or other systemic medical concerns. A brain CT (without contrast) was negative. Mr. Smith was released after being evaluated and was not admitted to the hospital. Mr. Smith said that after this incident Susan became concerned with his thinking and this eventually led to an evaluation with a physician and a diagnosis of dementia. Mr. Smith denied any other instances or auditory or visual hallucinations beyond those described above.

Mr. Smith was born and raised in Washington state, north of Seattle. Most of his adult life he lived in the Seattle area and lived independently until 5 years ago. About 10

CONFIDENTIAL

years ago, he moved to New Mexico to be closer to his daughter, Susan, and his grandchildren. Five years ago, Susan went through a divorce and she recommended that she and Mr. Smith move in together for financial reasons. Mr. Smith maintained his own financial records until he was diagnosed with dementia. Approximately 6 months ago, he moved to Colorado to live with his daughter Mary (age 60) and his son-in-law (age 65). Mary and her husband have no children. According to Mary (who accompanied Mr. Smith to this evaluation), Mr. Smith has not demonstrated any problems with memory or other areas of thinking. He stopped driving after the diagnosis of dementia was made approximately 1 year ago. However, since he has been living with Mary, he has been completely independent in other activities of daily living including managing his own medications, self-care, and household chores. He also enjoys playing board games, cards, and reading and there does not appear to have been any decline in these areas (per Mr. Smith and Mary).

Mr. Smith said he was born on time and said his parents never mentioned that he had any developmental problems. He did well in school but only completed 8 years of education because his family needed him to work on their farm. He had no other formal education. As an adult he worked for 30 years as a server at a high school cafeteria. After he retired from that job, he continued to work in a local hardware store for many years. At the time of the current evaluation, he had been retired from his second career for 20 years.

In terms of his current situation, he said he missed his grandchildren but enjoyed living with Mary and her husband. He felt he was treated like an adult with them and that Susan treated him like a child. He added, "She's a great mom, but she treats everyone like a child. Her husband got sick of being treated like a kid. That's why he left." He said he never did completely trust Susan's husband, but respected her choice. He commented, "Some things just got to be learnt the hard way, especially when you're hardheaded." He said that Mary was always calmer and more responsible than Susan and he expected that Mary would be the one to have raise children before Susan. He said that when he was married, his wife miscarried a boy: "That was as close as I came to having a son."

Mr. Smith's medical history is significant only for hypertension (well-controlled with medication), hypercholesterolemia (well controlled with medication), and, osteoporosis. Mr. Smith denied any other significant medical history. He has never had any or been treated for any psychiatric symptoms. Mr. He does not drink alcohol and quit smoking over 50 years ago. He has no history of recreational drug use. His current medications are: donepezil (5 mg PO QD), Lipitor (20 mg PO QD) and alendronate (70 mg PO qwk).

Mr. Smith's father died of a stroke at age 42 and his mother died of cardiac complications at age 75. Mr. Smith has one sibling (brother) who is 90-years-old and in good health. He has 2 children, daughters, both adults in good health. Mr. Smith was married for 45 years, but has been widowed for the past 25 years.

Behavioral Observations: Mr. Smith arrived on time for his appointment and was accompanied by his daughter Mary. He was casually dressed and neatly groomed and social interpersonal skills were preserved. His clothing was neat and clean—albeit it “old fashioned”. He was very pleasant and put forth good effort throughout the evaluation. His thinking was logical, clear and goal directed and there was no indication of hallucinations, delusions or other psychoses. No overt behavioral indications of a mood disturbance were observed and he displayed emotions appropriate to the topic being discussed. For example, when he spoke about his grandchildren, he smiled. When he spoke about his wife and their marriage, he smiled and then looked sad, when he spoke of her death. He was noted to laugh aloud at times and his humor was appropriate.

Mr. Smith was fully oriented with the exception of the city, which he did not know. He was able to give detailed information (e.g., specific dates) of his autobiographical history. His speech was fluent with normal articulation and rate and comprehension of auditory information was intact. He knew the correct day, month, year. He guessed the time of day within 5 minutes without looking at his watch. He knew his name, date of birth.

He lost 5 points on the MMSE for the following reasons:

- 1 for orientation (city)
- 1 for failure to recall 1/3 words
- 3 for errors in serial 7's

Tests Administered:

Cognitive Assessment: Wechsler Test of Adult Reading (WTAR); Wechsler Adult Intelligence Scale-IV (WAIS-IV) (partial); Attention Tests: WAIS-IV Digit Span, Trail Making Tests; Language Tests: Naming Test, Semantic Fluency; Visuospatial Tests: Figure Copy and Line Orientation; Learning/Memory Tests: Word List, Story and Figure recall; Reasoning/Abstraction: WAIS-IV Similarities and Matrix Reasoning; Personality: *Minnesota Multiphasic Personality Inventory-2 (MMPI-2)*

Test Scores:

TESTING SUMMARY:	Date of exam	Normative data	Current Level*
PREMORBID FUNCTIONING			
WTAR	10/50	SS = 68	Borderline/Low
DEMENTIA SCREENING			
MMSE	25/30	--	Within Normal Limits
ATTENTION			
WAIS-IV Digit Span (F, B)	5 F, 5 B	ss = 9	Average
Trail Making Test Part A	49"	T = 53	Average
Trail Making Test Part B	115"	T = 62	High Average
LANGUAGE			
Naming	10/10	>75 th %	High Average

Semantic Fluency	16 words/min	ss = 9	Average
VISUOSPATIAL			
Figure Copy	10/20	ss = 2	Extremely Low
Line Orientation	4/20	<2 nd %	Extremely Low
MEMORY			
Word List			
Learning Trials	17/40	ss = 6	Low Average
Delayed Recall	0/10	3-9 th %	Borderline
Recognition	19/20	26-50 th	Average
Story			
Learning Trials	8/24	ss = 4	Borderline/Low
Delayed Recall	6/12	ss = 8	Average
Figure Recall	6/20	ss = 6	Low Average
EXECUTIVE FUNCTIONS			
WAIS-IV Similarities	--	ss = 5	Borderline

*Based on age and/or education-matched normative data (as available)

SS = standard score; mean = 100, standard deviation = 15

ss = scaled score; mean = 10, standard deviation = 3

T = T-score; mean = 50, standard deviation = 10

z = z-score; mean = 0, standard deviation = 1