

CASE STUDIES FOR MENTAL HEALTH COMMITMENTS

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COUNTY ATTORNEY CONVENTION 2008

CASE STUDY NO. 1.

That John Smith of the Crisis Response Team for Southwest Montana, requested the Petition and he is interested in this case because of the unusual behavior of the Respondent, her inability to care for herself, and because she represents a hazard to her own health as well as potentially to others, as further described in the attached Report from John Smith, professional person.

She has a diagnosis of Bi-Polar Disorder, Manic and is threatening to harm either herself or others, including her daughter-in-law who lives next door to her. She attempted suicide two months ago and reportedly has not been taking her medications for several days.

CASE STUDY No. 2.

The Respondent is suffering from a mental disorder that requires commitment to Montana State Hospital. Specifically, the respondent has a history and diagnosis of Schizo Affective Disorder – Bi Polar type. Respondent was unable to provide for her own needs and that she previously was residing at the Gilder House but had refused to eat, take her medications and was threatening to leave, resulting in her current commitment. She presents an imminent threat of injury to herself and others, and is unable to make informed choices on taking medications. The Undersheriff reports that the Respondent's inability to function outside of an institutional setting is indicated by being unable to remain in the two less restrictive supervised settings, Gilder House in Butte and the Care House in Helena.

CASE STUDY No. 3.

The Respondent has a history and diagnosis of Psychotic Disorder NOS; manifested with delusional and abhorrent behavior. Respondent was unable to provide for his own needs and that he currently resides with his parents in Crossroads, Montana, presents an imminent threat of injury to himself and others as evidenced by his violent interactions with his father, including fist fights and pulling guns, and is unable to make informed choices on taking medications.

CASE STUDY NO. 4.

A Certified Mental Health Professional, examined the Respondent and determined that Respondent was suffering from a mental disorder that required her commitment at the Montana State Hospital to protect her from suicidal ideation and threats to harm herself.

The respondent has a history and diagnosis of Bi-polar Disorder. Respondent was unable to provide for her own needs and that she currently resides on her own and presents an imminent threat of injury to herself and others, and is unable to make informed choices on taking medications. The overt acts of include refusing to cooperate in her mental health treatment at Gilder House and threats to commit suicide by cutting herself or hanging herself.

CASE STUDY NO. 5

The respondent has a history and diagnosis of paranoid schizophrenia. Respondent was unable to provide for his own needs and that he currently resides at the nursing home and presents an imminent threat of injury to himself and others, and is unable to make informed choices on taking medications. The overt acts of include refusing medical treatment to treat a severely bleeding nose, removing packing from his nose and relating to staff that God was putting pressure on his brain and that was what was coming out his nose, not blood.