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**PSYCHOLOGICAL EVALUATION**

NAME: Coleen Kerwick  
AGE: 36 years  
EDUCATION: 18 years  
DATE OF BIRTH: 3/9/76  
GENDER: female  
HANDEDNESS: Right-handed  
DATE OF VISIT: 9/24/12, 10/27/12  
DATE OF REPORT: 11/6/12  
REFERRED BY: self referred

**TESTS ADMINISTERED:**

Personality Assessment Inventory  
Thematic Apperception Test  
Clinical Interview  
Clinical Observation

**HISTORY AND REASON FOR REFERRAL:**

The patient, Coleen Kerwick, has requested a psychological evaluation to assess her current emotional and personality status.

Patient came alone.

Chief Complaint:

Ms. Kerwick describes herself as a well adjusted, high functioning person who has established and maintained good, stable relationships throughout her life. She has several good friends with whom she maintains regular contact.

Ms. Kerwick explains that she is very close to her cousins and their family. Her parents and siblings still reside in Ireland and they all visit each other frequently and stay very close. She calls her mother in Ireland and emails her dad daily.

Ms. Kerwick describes that she had always had very good, solid relationships with people. She recalls that she had only one boyfriend throughout her college years and still maintains very good friendship with her friends and their families (including her ex-boyfriend from college). She adds that her son and her friends' children often play together when she visits Ireland. She is on good speaking terms with her first ex-husband.

Ms. Kerwick asserts that she has never suffered from depression, but when divorce from her second husband has started, she felt very sad when she did not have her child living with her every day. She still misses him a lot when he spends time with his father. After she filed for divorce, she sought help in recovering from her abusive relationship and, hence, started attending psychotherapy for women who suffered marital abuse.

Otherwise, Ms. Kerwick reports that she has never required any psychiatric treatment for any psychiatric or personality disorders. Ms. Kerwick denies mood swings, hallucinations, delusions, prior PTSD symptoms, anxiety, anger control problems, although she admitted to yelling while arguing with her current husband when she was very upset about their marital terms and ongoing psychological and physical abuse.

Ms. Kerwick explains that she was previously married to her first husband in 2000, but that marriage ended in 2007. She explains that her first husband was a very good man, native of Romania. They got married very young, when he was an unemployed PhD student in music. They have separated hoping that he would realize that he needs to get a job to contribute to the household expenses. She had no children with her first husband.

Ms. Kerwick met her second husband and became friends with him during her separation from the first husband. She married her second husband in 2008 and had her first child, Nicholas, in 2009.

Ms. Kerwick explains that she initially had a long distance relationship with her second husband, while she was living in New York and he was in Connecticut. They saw each other on the weekends. She admits that her parents and friends did not like him because they have noticed how dismissive he was of them.

However, she married him anyway and moved to Connecticut regardless her family and friends' objections. She adds that her family members boycotted her wedding.

Ms. Kerwick describes that, once she moved in with her second husband, he has become very controlling. She adds that he wanted to change her personality, including her appearance, mannerisms and behavior. In his attempt to change her appearance, he took away food and insisted on her exercising because he believed she was "out of shape", while her usual weight has always been around 105 lbs. He also asked her to die her hair blonde (while her natural hair color is red).

She notes that he would not let her sleep and insisted on her getting up with him at 5-6am because he suffered from insomnia and wanted her to keep him accompany during his sleepless hours. Even after their son was born, he insisted on her not sleeping early in morning and not take naps during the day even though she was up all night caring for their child. When she visited her friends and cousins in New York, he would call her from CT to make sure she did not sleep when he was up at 5 am.

Moreover, he did not want to share his finances with her and, thus, they both contributed to their living expenses, with the exception of him paying mortgage on their house.

He had very little time for her and shortly after they married, he started spending more and more time away from home while controlling and supervising her every step, including her short trips to a nail salon.

Ms. Kerwick recalls that her then husband started physically abuse her when she was 8 months pregnant. She explained that she was tired during her pregnancy with her son but he did not allow her to sleep and insisted her to "fight it". She describes an episode when he pulled her arm very roughly in public, which alarmed people and prompted them to come to her help. She recalls an episode when he got upset and hit her while they were visiting Ireland. She adds that every time he hit her, he insisted that she deserved it, asked for it, and should apologize to him for speaking up for herself.

Furthermore, Ms. Kerwick explained that her then husband insisted on caring for their son Nicholas in ways that contradicted current pediatric literature and was even known to contribute to fatal results. She feared for her child's health and safety and stood up to him, but that drew a lot of anger from her husband. She adds that he has become very controlling, did not want to hear her opinion on any issue that came up during their marriage, and isolated her from her friends and family.

She tried to leave him a few times, asked him to let her leave, and even contacted the divorce attorneys, but it was hard for her to do so because he was controlling her every step. She eventually served him with separation papers and tried to move to New York, closer to her support network, but he filed for divorce in Connecticut which prevented her from moving to New York with their child. As a result, she remained in Connecticut to share the custody of their child. Ms. Kerwick states that their divorce is not final yet.

She describes an episode when he lied to the police and had her arrested when he called the police and complained that she hit him (she adds that this case was dismissed after it was determined that she did not hit him). She recalls that she felt shaken up when he called the police and reported that she had hit him. She felt that this event was very abnormal in her life as she had never committed any illegal, abusive or violent actions.

After filing for divorce, he withdrew money from their joint account and asked her to take unpaid leave to care for their child who developed seizures at that time. He did not give any money for the child support, so her parents had to support her during this time. "I'm very blessed to have such a good support network and the family who held me up and made sure my child and I were OK."

Current Medications:

none

Current Treating Doctors:

none

Current Treatments and Services:

Psychotherapy at the Interval House (an organization for abused and battered women) since July 2011 to address her emotional distress due to psychological and physical abuse.

Academic, Social and Residential History:

Ms. Kerwick reports that she was born and raised in her native Ireland. She graduated from high school and Law School in Ireland with honors. While attending school and college, she was working in children's film making company, which she enjoyed a lot (mostly creative art behind the scenes).

She immigrated to the United States in 2000, right after her graduation from the Law School. She took NY Bar exam and initially worked at Coleman and Duckman Law Firm and then took a job at Dumbroff and Gillmore Aviation Litigation Law Firm.

Ms. Kerwick speaks English and Irish languages fluently and also some German and Romanian.

Ms. Kerwick currently resides in Avon, CT, with her 3 year old child, whose custody she shares with child's biological father.

Past Medical History:

Ms. Kerwick reports smoking socially between 2000 and 2006. Currently, she may have a glass of wine twice a month.

Otherwise, Ms. Kerwick reports no past history of prior abuse of any kind, major childhood diseases, major surgeries, Lyme disease, frequent ear infections,

encephalitis, meningitis, EBV, DM, HTN, seizures, CVD, CVA, TBI, LOC, tropical infection, or other conditions known to affect cortical functions.

### TEST RESULTS:

Ms. Kerwick presented as a pleasant, polite, and friendly young woman. She was appropriately concerned about her abusive relationship with her second husband, divorce, her child's health condition, and the inability to see her child every day due to shared custody arrangements.

She did not display any socially inappropriate or aggressive behaviors, signs of depression, mania, poor anger control, poor impulse control, hallucinations, thought disorder, or any psychological and psychiatric disorders. She denied current suicidal/homicidal ideation and plan.

Mood and affect were situationally appropriate.

On this administration of the PAI, his psychological profile was found to be valid, as her response pattern indicated that she appropriately attended to and consistently responded to all 344 questions, and did not attempt to exaggerate or minimize her emotional concerns, deliberately distort her clinical picture, or create unrealistically favorable impression of her personality.

Her psychological profile was free of signs of somatization and conversion tendencies, symptoms of anxiety, depression, psychosis, schizophrenia, obsessive-compulsive behaviors, mania, post-traumatic disorder, hyper-vigilance, and heightened affective instability.

Moreover, her psychological profile was free of symptoms of alcohol and drug use, borderline personality disorder, anger control problems, antisocial personality disorder, identity problems, egocentric tendencies, stimulation seeking, and attention seeking tendencies.

Her responses to an objective psychological measure revealed that she is warm, compassionate, outgoing, ambitious, active, self-confident, and sensitive individual.

Her responses suggest that she is a person who accepts personal responsibility and is ready to make changes if necessary to better herself and her relationships with others.

Her responses also suggest that she maintains a good support network and close and warm personal relationships with others. Moreover, her response pattern indicated that she is supportive and sympathetic towards others and capable of resolving common conflicts when they occur.

On this administration of Thematic Apperception Test (TAT), Ms. Kerwick produced stories describing several pictures, which are designed to evoke some of the dominant drives, emotions, conflicts, and complexities of the patient's personality.

Ms. Kerwick's TAT stories revealed that her first reaction to disappointments and sad events in life is thinking, considering possible solutions and adjusting to the changes these events bring, just as her TAT story character "...is contemplating. He is deep in thought. I think that he will grow to love it and will find a way to overcome this disappointment and pick up the violin and play a happy, not a sad tune."

Ms. Kerwick projects her realistic and productive approach to dealing with a sad event onto her other character in a TAT story: "I think she is sad and something happened to her. She needs to touch the depth of her sadness to start the healing process. When something bad happens you can't forget and continue your life. You need to face it, identify it, heal your sadness, so you can continue to exist... if she is so sad, you have to be there for her. I think she is gonna be OK, will pick herself up, hold her head high. She will understand what had happened and know that 'whatever didn't kill you makes you stronger' and it will get her to a better place. And I think because she is not numb, she is able to feel pain, sorrow, anger, and that's why she fell down. It's like a baby, you have to learn to fall down first before you learn to walk."

Ms. Kerwick also describes her approach to hurt and abuse through her female character in a TAT story "...who is grasping the door and holding her face ...as if someone just hit her in the face. She is holding her face partly to hide it and partly because of pain, but she is not falling and she is not gonna let it get to her, because she has a lot of pride. That's why she is covering her face because she doesn't want people to see that she was hit. ...She is a strong woman, even though she is thin, her arms are quite muscular and her hands are large for a woman. She is not gonna let whatever happened get to her. She looks like she is out the door, so she will pick her head up and walk out of that door. And she is not going back. "

Ms. Kerwick projected her image of a "Strong independent, powerful woman..." onto her female character in another TAT story. She further describes her as, "She knows who she is. She can do anything that she wants to do and she knows it, but she is a good person and will not try to use people. She must have some people around her, she got a support network that make her so comfortable, elevate her, make her happy and content. No one can be so serene being alone."

Ms. Kerwick associates a family life with work, peaceful existence, expecting a child, and being a good parent, just like her TAT story describes, "The weather is nice, probably around the Fall, like now. It's a very peaceful scene.... The man is working away.... They are dressed modestly.... The woman on the right will give birth to a child and will be a good mom, she got a face which is calm but serious and peaceful at the same time. It's a quiet happiness. I'm guessing these two men are their husbands. I think it's nice, easy life that at times we forget, like nothing necessary has to happen, it's a life that just goes on and nothing is broken and nothing to fix. Like in the old times, you get married, have kids, work, and be happy....very nice to live there."

Ms. Kerwick's TAT stories reveal that she longs for warm, loving, and supportive intimate relationship with a man, but does not currently have one and may sadly recall her past hopes for such relationship, just like the female character in her TAT story, "She is pretty but there is sadness about her, this fake seductiveness she displays, I hope she would have better aspiration in life than selling herself. Or maybe she actually loves this guy and it must be a very hard thing to love someone when they don't love you back."

Her other character reveals Ms. Kerwick's inner strength and emotional maturity to accurately assess how she is being treated by others and to stand up for herself to protect herself: "...She is beautiful and strong and I think she doesn't have a problem letting people know when they are disrespectful. She has intelligent look on her. I think that she has this look letting him know he is wrong.... I think she can do whatever she wants, she is strong, and I don't think she is one of those women who need a man to take care of them. I think she can take care of herself."

She personalizes the TAT pictures when they evoke familiar and close to her heart images, such as her mother. Adult characters in her stories are human, real, emotionally mature, have a strong backbone, are dealing with real life disappointments and seeking forgiveness.

Her narratives reveal that Ms. Kerwick understands that people may make mistakes because they are human, and she accepts their faults and apologies. "This is a picture of an old woman, looking at the window. She is very refined and serious but there is a light element of surprise in her face and she is clasping her hands just the way my mom does. And she is dressed just the way my mom dresses- very modest... Or maybe he said something that he regrets saying and she is looking at the window because she is sad. But she is very nice sweet woman. She actually looks like my mom - the nicest person you can meet. And I think he is not a bad person, he is human, has feelings and everyone can have reactions. He has a lovingly concerned look. He is also dressed up nice, with a tie and suit, and his hair is slicked back. Decent normal guy and a sweet old lady."

Ms. Kerwick projects her idea of the relationship with family members, which involves understanding, forgiveness, love, and caring, in another TAT story: "Even though the son looks a bit sad, his father's face looks very calm and relaxed and seems like there is good bond here. He is going to cheer him up, provide serene calm attention. When you reach certain age and maturity you become friends with your parents, so this looks like a time when you can share things with your parent. It's a wonderful moment captured in this picture. They will always have a tight bond and live close to each other."

Ms. Kerwick hopes her child will grow up happy, inquisitive, and emotionally strong: "Maybe he is walking up to his class, eager to learn, suck up the knowledge. Or maybe this is afterschool time and he is going to play after school. He is gonna grow up to be a great boy, will go to college and achieve great things. This is a kid who enjoys learning and knowledge and will use this knowledge to make a world a better place."

She also projects her hopes for her child to grow up happy in another TAT story: "This is a cute little boy on the farm and he is sitting and watching everyone working on the farm. And he is sitting and watching the people working on the farm, and chickens and cows and learning everything around him. And he has this great intensity in his eyes and he is clapping his eyes, so he probably will soon start helping people on the farm. He wants to learn now. He is gonna grow up to be a farmer just like his daddy and he has a great mom, the best mom in the world. And he has all the sun light shining in his face. It's a pretty picture and a pretty kid because he is happy."

Lastly, Ms. Kerwick hopes for the better future even when she feels being the middle of a war zone, as she projects her perception of one TAT picture with a morbid content. "This looks like it was filmed in the war. This man is standing and looking at the light. Maybe it's window and put his foot on the window. Looks like he was in the dark and now found the light. Or maybe it's a she with short hair. It's someone who is looking towards the future and towards the light. Good things will become of him or her, this person, because there is a belief that anything is possible. It's pure light and pure hope in the window, like a pure clean sheet to write whatever you want. "

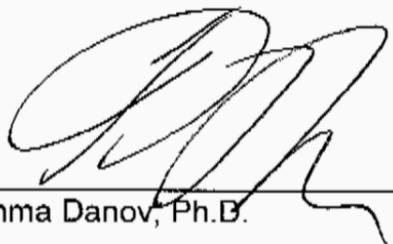
**CLINICAL IMPRESSION:**

Ms. Kerwick presents as an emotionally stable, mature, well-adjusted and responsible individual, who is able to maintain composure during stressful and upsetting moments, approach problems with patience and reason.

She maintains a positive attitude towards future, expects others and herself to remain responsible, caring, and mature adults, and hopes to raise a happy and well-adjusted child.

She possesses and employs mature psychological defense mechanisms to faced with upsetting and anxiety-provoking situations, wherein she starts analyzing the situation, consider possible motives behind others' behaviors and feelings, contemplates possible reactions and responses she may pursue in given situations, and maintains a healthy, positive attitude and hope that problems will be resolved in a mature and respectable way.

She does not present with any symptoms of personality disorders or psychiatric disorders. She appears to have successfully resolved her emotional distress caused by the psychological and physical abuse she endured in her relationship with her second husband.



Dr. Rimma Danov, Ph.D.

Pediatric & Adult Clinical Neuropsychologist

CC: patient