

IN THE SUPREME COURT FOR THE STATE OF NEVADA

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Elizabeth A. Brown
Clerk of Supreme Court

Jeffrey Reed, Petitioner, vs. Alecia Reed nka Draper and Alicia Draper, as Conservator for Emily Reed, Respondent.	Supreme Court #: 82575 (Appeal) District Court Case #: 05D338668
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BRENNAN LAW FIRM

/s/ Elizabeth Brennan

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Respectfully Submitted on this 10th day of January, 2022.

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CERTIFICATE OF SERVICE

The foregoing **Respondent's Appendix** in the above-captioned case was served this date by mailing a true and correct copy thereof, via first class, postage prepaid and addressed as follows **and** by electronic service through the Court's electronic filing system:

Amanda M. Roberts, Esq.
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Clerk, Nevada Supreme Court
201 S. Carson Street, Suite 201
Carson City, Nevada 89701

Dated this 10th day of January, 2022.

/s/ Elizabeth Brennan
an employee of Brennan Law Firm

1 MS. BRENNAN: -- Amanda to do that?

2 THE COURT: -- ask another question.

3 BY MS. ROBERTS:

4 Q Did you review the records from Elise Collier?

5 A I have reviewed all the records that are in all the
6 exhibits.

7 Q Do you believe having Elise Collier's information
8 and records would impact your opinion?

9 A I don't think it would change my opinion as to
10 whether or not Emily is disabled or can work and support
11 herself.

12 Q Would it be helpful to have those records?

13 A What way?

14 Q In any way.

15 A I'll try to stay in contact with my patient's
16 therapist. I see in the notes we'll try to touch base and I
17 think there's a whole section in there of -- of notes with her
18 therapist, various therapists that she saw. And I think that
19 just makes my practice of medicine better. But seeing her as
20 regularly as I have been, I -- I don't think that there's
21 anything that could happen in between sessions that would
22 change my opinion of whether or not she's able to work unless
23 in between my sessions she's been out working.

24 Q She's represented to you in the sessions that she

1 has been working, correct?

2 A No, I believe she -- you'll have to tell me what
3 page you're looking at. I believe she went to her
4 stepfather's to try to learn filing or something in my
5 recollection, but I don't believe she ever have paid
6 employment in the whole time I --

7 Q Did she tell you what her mother does for a living?

8 A Her mother left her job and we had to put her on
9 FMLA to take care of Emily. I don't know what she's doing
10 now.

11 Q Did she -- did Emily specifically tell you that she
12 was working her mother's business?

13 A Her mom had for a time I think a cookie company.
14 And she was helping her.

15 Q What period of time was that?

16 A I would have to look at my notes.

17 Q Okay. Well, I will direct you to 2007.

18 A In the same exhibit?

19 Q Yeah.

20 A 2007. What is your question regarding this page?

21 Q She represented to you that she was working in her
22 mother's business, correct?

23 A And she was working with her mom baking for the
24 business and sending emails.

1 Q Okay.

2 A I don't know whether --

3 Q And she enjoys it.

4 A -- she is a (indiscernible) -- I'm sorry?

5 Q And she said she enjoyed it, correct?

6 A Yes.

7 Q Did you ever follow up with her regarding how long
8 this tran -- how long this occurred?

9 A I -- I mean, I have to read through all the notes to
10 know. I -- I don't know that she was even in a -- a paid
11 employee. You would have to talk to her mother about that.

12 Q Well, if she's able to bake and she's able to send
13 the emails, I'm sorry, what did it say? Let me look. She's
14 able to bake, she's sending emails, she's clearly doing some
15 skills that an employee would do, correct?

16 A Possible. I don't know the capacity to which she
17 did that.

18 Q Would knowing this impact the outcome -- or impact
19 your opinion of the report?

20 A It depends how long. If I had evidence that she was
21 able to have substantial employment that would enable her to
22 support herself, then that would change my opinion.

23 Q But any employment is going to impact her ability to
24 support herself, correct?

1 A It will, but I believe that it needs to be gainful
2 employment. So working for profit which to my knowledge she
3 hasn't done and be able to support herself.

4 Q Based upon this statement, she's baking with her
5 mother and sending the emails. So if she's capable of doing
6 that for her mother's company without pay, she should be
7 capable of doing it for pay, correct?

8 A I -- I think you would have to ask her mother what
9 the extent of participation in that was.

10 Q In the records that we were going through before we
11 switched from -- let me get there, I'm sorry. There's a gap
12 in treatment it appears from the records provided. So it says
13 -- if you go back to 1980, that is September of 2016. And
14 then the records that I have show a gap that she did not come
15 back until November 2016.

16 A 19 --

17 Q 19 --

18 A What exhibit are you --

19 MS. BRENNAN: Exhibit 19.

20 Q Bates Stamp 1980.

21 A But what page are you starting on?

22 Q I see one on 1980 that starts on September 22nd of
23 2016. Do you see that?

24 A 80 --

1 Q I'm sorry?

2 A Yes, I see that.

3 Q Okay. So the next -- the next essentially progress
4 notes skip from September to November.

5 A Yes.

6 Q Okay. Do you know what happened between September
7 and November?

8 A It looks like she was doing I believe therapy, was
9 doing deep psychodrama group and a Skype session with her in
10 addition to that.

11 Q So she didn't see you during that period of time?

12 A It doesn't appear.

13 Q Okay. In this report that -- the November 15, 2016
14 report, it said that she had been on a road trip through
15 California returning Saturday night with her anxiety starting
16 Sunday. Who was she --

17 MS. BRENNAN: What -- what page?

18 Q -- on a road trip with, do you recall?

19 MS. BRENNAN: What Bates number? I'm sorry.

20 MS. ROBERTS: 1982.

21 MS. BRENNAN: Thank you.

22 A Do you have a question?

23 Q There was one pending. Yes. So who was she with on
24 this trip?

1 A It's not document --

2 Q And why did -- and why did she have anxiety upon
3 returning to her mom's home?

4 A Not documented in the medical record.

5 Q And you never followed up on those issues?

6 A Well, I -- I didn't document it. I -- I -- we would
7 have had a discussion but I -- I -- this is -- I can't put
8 everything in the medical record that comes out of her mouth.

9 Q So then you do confirm she did work as an intern for
10 her stepfather. You just don't have specifics about what she
11 did, correct?

12 A My understanding is she did a trial at her stepdad's
13 maybe a day or so a week. I'd have to look back at my notes.

14 Q Throughout your treatment of Emily, how frequently
15 has she been going to stay longer than a week at grandma's
16 house?

17 A You know, I'd have to go through.

18 Q I'm sorry?

19 A I would have to go through her entire record to --
20 to look at when I documented where she was. I don't have like
21 one document that tells me where she was staying at any
22 specific time.

23 Q Is it more than five or six times to the best of
24 your recollection?

1 A I -- I can't speculate on the number of times she's
2 gone to visit her grandmother.

3 Q So the more recent records are in Exhibit 15. Can
4 you turn to those exhibits?

5 A I'm getting there. Give the page number for me.

6 Q 1671. These records are dated December 3rd of 2019.
7 This says that she's now staying with her grandmother and that
8 things are pretty calm with her grandmother. Is that
9 accurate?

10 A I'm sorry, what was the question?

11 Q The records state she's been staying with her
12 grandmother. How long has she been with her grandmother?

13 A Well, it -- according to my notes she had just left
14 a treatment center called Pasadena Villa Smoky Mountain Lodge
15 in Tennessee where she had been in residential treatment for
16 three months. And so I don't know how long she had been with
17 her grandmother at -- at that --

18 Q Did she disclose to you the sexual abuse in her
19 mom's home before or after going to the Pasadena Villa Smoky
20 Mountain Lodge?

21 A I would have to look through my record to find out
22 exactly when that was.

23 Q So I'm going to represent to you that nothing that
24 you -- has been provided states anything about this disclosure

1 in these records. Would that be something you would have
2 documented?

3 A Yes.

4 Q You indicated in ER1938, so Bates Stamp 1938, those
5 are the records from your visit on April 29th of 2016 you just
6 testified about when she lost her driver's license.

7 A Okay. Sorry, you're in exhibit what?

8 Q 19.

9 A page 1938?

10 Q Correct. You testified in reference to this page
11 that this is when you learned that Emily had lost her driver's
12 license after a session with Dr. Collier.

13 A I'm not there yet.

14 Q So --

15 A Okay. 1938.

16 Q So in relation to those pages, you testified that
17 she had lost her dri -- her driver's license after a session
18 with Dr. -- or with Elise Collier. You then did the letter on
19 June 2nd for her so that she can get her driver's license
20 reinstated. Did you review records from Elise prior to doing
21 that letter on June 2nd?

22 A I spoke with her. The -- the incident happened
23 about a month before Emily came to see me and that was the
24 reason Elise Collier referred Emily to see me. So that -- if

1 we -- would probably be in my first -- so if you look at my
2 initial visit with her, the 1820s, her history is outlined.
3 This is my first visit with her.

4 Q Where did you get the history? It would have been
5 from records or would have been from somebody disclosing it to
6 you during the session?

7 A Yes. So the procedure for these comprehensive
8 evaluations is the applications and then someone close to them
9 to fill out symptom checklists. And we ask the patient and
10 their family to provide the history. So when I first meet
11 with them, that's already been done with one of our
12 therapists.

13 Q I'm sorry, you cut off. What -- what's been done
14 with the therapist, filling out the forms or looking at the
15 medical records?

16 A They -- they bring the forms in and the therapist
17 meets with them, gets the history, gets everything into the
18 form that you see it as it is. So when I meet -- when I met
19 with Emily the first time I read through the history that was
20 there, talked with them to make sure I was on the same page
21 with them and had a good understanding of that then went over
22 all of the testimony.

23 Q Since April 4th -- or April 7th of 2014 until
24 present do you believe she's had any periods where she has

1 been stable?

2 A Define periods. Like a week?

3 Q Well, you seem to see her every 30 days. So any
4 period -- 30 day period that she's been stable?

5 A There were 30 day periods where she would have less
6 suicidal ideation. Again, I'd have to go through note-by-note
7 to go through with you.

8 Q Well, so I've gone through all of your medical
9 records and every single note -- so for example, are -- are
10 you still in 19 or are you back in 15? Just I'll make it
11 easier for you.

12 A I'm in 19.

13 Q Okay. So go to 1974. Are -- are you there?

14 A Almost. 1974.

15 Q Okay. So in every medical note that you progress
16 note, there's a section at the bottom that says thought
17 content. Every single one of the medical records that I've
18 read says something to the effect of no homicidal ideation or
19 no suicidal ideation, no evidence of -- just like this one
20 does. There's not one -- I'm going to -- go ahead. No, go
21 ahead.

22 A What I was saying is so that is in this moment. So
23 if she's having other suicidal ideation, it'll be in that --
24 that first session.

1 Q So that would have been in the interval histories.

2 A Yes, since her last visit.

3 Q Can you explain or did you inquire from anybody why
4 after leaving Center for Discovery, that 35 day program, and
5 when she went into Del Amo why it indicates that she was given
6 medication at Center for Discovery but then when she checked
7 into Del Amo she was on no medications?

8 A I don't know how to answer that. I don't know
9 how --

10 Q What kind of -- oh, sorry.

11 A I was just going to say I don't have, as I've said
12 before, the record for in between where the medical record is
13 that's been provided to me.

14 Q So you don't have a complete record.

15 A I have everything you have in each of the exhibits.

16 Q The -- but there are no -- we've already established
17 there are no medical records for that period and you do not
18 know what happened during that period, correct?

19 A Correct. And only based on the school report.
20 There's no ma --

21 Q What -- what insurance does your practice take?

22 A We don't take any insurance.

23 Q And are there other -- you're a psychiatrist,
24 correct? You -- you prescribe her medication, you're her

1 psychiatrist?

2 A Correct.

3 Q Are there other psychiatrists in your general area
4 that do accept insurance?

5 A I'm sure there are.

6 Q Do you know specifically why you were selected
7 instead of going to somebody that's on insurance?

8 A Emily was referred to me --

9 Q Are you still there? It cut out.

10 A Yes. I said Emily was referred to me from her
11 therapist.

12 Q So that's the only reason that you were selected
13 rather than someone on insurance.

14 MS. BRENNAN: Objection, it calls for speculation.

15 MS. ROBERTS: I'll withdraw it, Your Honor.

16 THE COURT: Thank you.

17 BY MS. ROBERTS:

18 Q Did you ever discuss with Alecia Draper going to a
19 psychiatrist that has -- that is covered by Emily's insurance?

20 A No, I'd have to look through the medical record to
21 see.

22 Q Did you talk to Ms. Brennan before you testified
23 today?

24 A Yes.

1 Q When did you talk to her?

2 A Yesterday.

3 Q What was the time? Go ahead.

4 A We spoke yesterday and touched base today.

5 Q What time did you talk to her today?

6 A She contacted me to tell me that I needed to be
7 ready to go at 1:20.

8 Q Was there anything else discussed during that
9 conversation?

10 A I think -- I took notes from our conversation
11 yesterday and today she just said she wanted me to be ready to
12 testify on the cases and the -- that the hospitalizations and
13 the IEPs from high school.

14 Q Was that yesterday she told you that or she told you
15 that today?

16 A Today.

17 Q Did she tell you anything that had gone on in the
18 morning from trust -- from trial?

19 A No, my recollection.

20 Q What did you talk about yesterday?

21 A She sent me a case to review, Edgington vs.
22 Edgington. We reviewed the NRS 125B.110. We looked at kind
23 of the case precedence. So I -- I -- we -- she talked to me
24 about it and then I read it last night. And she just talked

1 to me about taking things slowly, think before you speak, you
2 know, prepare -- kind of get to know the exhibit list. And
3 that's what we went through.

4 Q To the best of your knowledge, when was Emily most
5 recently hospitalized?

6 A I'd have to look at the record.

7 Q Do you have those with you today? They have not
8 been provided to us.

9 MS. BRENNAN: Yes, they have. Objection. They're
10 in --

11 THE COURT: Stop.

12 MS. BRENNAN: -- the record.

13 THE COURT: Wait. Remember when you were directing
14 this witness she said that her records had been produced but
15 that her ongoing treatment records, specifically in a portion
16 of 2020 had not been produced. Isn't that what you said, Dr.
17 Love?

18 THE WITNESS: I believe --

19 MS. BRENNAN: That is what --

20 THE COURT: So presumably since --

21 MS. BRENNAN: I'm sorry, Judge.

22 THE COURT: -- she saw there was testimony that she
23 saw the child as recently as this week. So those records
24 haven't been produced. And I'm -- the discovery was cutoff a

1 few months ago. So I imagine that records -- that from
2 sessions since haven't been produced. So is it your question
3 Ms. Roberts going to -- to ask the witness what portion of
4 the records have not been produced?

5 MS. BRENNAN: Judge --

6 MS. ROBERTS: Yes, Your Honor.

7 MS. BRENNAN: -- the question --

8 MS. ROBERTS: I want to know --

9 THE COURT: The objection --

10 MS. BRENNAN: Judge, I'm --

11 THE COURT: The -- we're -- it's the --

12 MS. BRENNAN: I'm sorry, Judge.

13 THE COURT: I -- we're talking at the same time.

14 The -- the Court did not take the question to mean that the
15 witness was somehow withholding information that was required
16 to be produced, that the case has been in the can so to speak
17 since April. We were supposed to go to -- have an evidentiary
18 proceeding at least twice over the last two to three months
19 and it was delayed because of the pandemic. So is it -- is it
20 your question Ms. Roberts is that there are some records from
21 recent treatment that you haven't received? Isn't that what
22 you're asking her?

23 MS. ROBERTS: Yes, Your Honor. And if she can tell
24 me when she was most recently hospitalized.

1 THE COURT: Right. So -- so --
2 MS. BRENNAN: And --
3 THE COURT: -- it -- I -- I don't think that this is
4 an indictment of production or Counsel or anything else. This
5 is just a --
6 MS. ROBERTS: It's not --
7 THE COURT: -- question of --
8 MS. ROBERTS: -- Your Honor.
9 THE COURT: -- ongoing treatment. So --
10 MS. BRENNAN: I understand that, Judge. I'm sorry,
11 but my point is this -- the question misstates the evidence
12 because the question specifically asked when was the last
13 hospitalization of Emily and it's my understanding and belief
14 that those -- that her lost hospitala -- lization records are
15 in fact in these exhibits. I would have gone through --
16 THE COURT: Well, I know that --
17 MS. BRENNAN: -- that on --
18 THE COURT: -- but look.
19 MS. BRENNAN: -- direct --
20 THE COURT: Look.
21 MS. BRENNAN: -- but --
22 THE COURT: It -- you -- you may know this case and
23 the details of those type of facts better than the Court, but
24 Counsel can ask the question of the witness so the witness can

1 establish that point. It may be that the answer --

2 MS. BRENNAN: I understand that.

3 THE COURT: -- to the question is that the last
4 hospitalization is included in the records that had been
5 presented. But that's not -- that's not a basis to object.
6 Okay. So --

7 MS. BRENNAN: The --

8 THE COURT: -- the --

9 MS. BRENNAN: -- obje --

10 THE COURT: -- state --

11 MS. BRENNAN: I'm sorry. The basis for my objection
12 Your Honor just for the record is clear is that the question
13 misstates the evidence because the question says and suggests
14 that the last ho -- hospitalization for Emily is not in this
15 record. And the last hospitalization for Emily is in fact in
16 this record.

17 THE COURT: All right. Well --

18 MS. BRENNAN: It is --

19 THE COURT: -- Coun --

20 MS. BRENNAN: -- an exhibit in this --

21 THE COURT: Counsel does -- I mean, I don't know
22 whether Ms. Roberts has a -- has that understanding. She can
23 ask the question.

24 MS. BRENNAN: Well, it doesn't --

1 THE COURT: You made your point.

2 MS. BRENNAN: -- mean she can --

3 THE COURT: Ms. Roberts, state the question again,
4 please.

5 BY MS. ROBERTS:

6 Q Dr. Love, when was the last time that Emily was
7 hospitalized?

8 A I'd have to look at the record since the last time
9 her records were subpoenaed and sent in --

10 Q Okay.

11 A -- to see when the last --

12 Q Okay.

13 A -- one was.

14 Q So according to this document, the last time that
15 happened was your report on November 21st of 2019.

16 A Okay.

17 Q Is that fair to say?

18 A It -- I remember -- I know that's the date of the
19 report. I don't know the date of -- because I -- I don't work
20 in the medical records department. So I don't know the exact
21 date and when you requested the records to that date. I -- I
22 believe it was sometime in -- in the end of November of 2019.

23 Q Regarding the records of the hospitalization?

24 A Regarding request for records. I believe that's as

1 far as the records go.

2 Q And do you have independent recollection as we sit
3 here today about the last time she was hospitalized?

4 A She has been hospitalized in 2020.

5 THE COURT: All right. Let -- let me just --

6 Q And was that --

7 THE COURT: Let me just make -- I need to iron out
8 this -- this dialogue here, okay? The witness was asked on
9 direct whether she produced her entire file. She said she
10 produced her entire file. She said the the only records of
11 treatment were records of treatment in 2020. The question
12 that was asked is when was the last time she had a
13 hospitalization. Now the witness has said that there was a
14 hospitalization in 2020 which creates a conflict based on the
15 interjection that Ms. Brennan said. Okay. So let's not dance
16 around it. If the witness knows that Emily was hospitalized,
17 then she -- then she should give us a general understanding of
18 when that occurred and if it occurred after the discovery
19 cutoff or after her entire file was produced subsequent to
20 that, that's the point that you're trying to establish, Ms.
21 Roberts; is it not?

22 MS. ROBERTS: Yes, Your Honor.

23 THE COURT: All right. So it sounds like the
24 witness said that Emily was hospitalized in 2020; is that

1 correct?

2 THE WITNESS: Yes, sir.

3 THE COURT: All right. And is it possible that you
4 produced your entire file and that the most recently
5 hospitalization occurred after you produced your entire file?

6 THE WITNESS: Yes, Your Honor.

7 THE COURT: Okay. Go on, Ms. Roberts.

8 BY MS. ROBERTS:

9 Q Do you know when it happened in 2020?

10 A There was one hospitalization that I remember in
11 early January. I would have to go through my record to see if
12 there's been one since.

13 Q What was that hospitalization for in January of
14 2020?

15 A It -- I'd have to pull up my medical record. I
16 don't have that in front of me. What I've -- what I have in
17 front of me is the dates she's seen me since November 2019.

18 Q Can you tell me those dates?

19 A Yes, she was seen on December 3rd, 2019. She -- her
20 mom called me January 2nd because Emily was in the hospital so
21 we cancelled her January 8th appointment. I saw her January
22 30th, February 20th, March 17th, April 9th, May 7th, June
23 15th, and August 4th.

24 Q Why no -- why no appointment in July?

1 A I don't know.

2 Q Why didn't you have an appointment in July?

3 A I don't know.

4 Q Oh, I'm sorry. I -- I didn't hear you. I didn't
5 hear you say you didn't know. So she called you on January
6 2nd and said that Emily was in the hospital.

7 A Yes.

8 Q Did she represent to you that day that Emily was in
9 the hospital because it had been learned that she had been
10 sexually abused by her stepbrother?

11 A I have to look in the chart to see if -- what the
12 timeline is on that.

13 Q If you knew Emily's health insurance provider could
14 you provide a list of psychiatrists who are covered under that
15 insurance provider list?

16 A I think the easiest thing is to look up your
17 insurance like online or call the number in your card and see
18 who's in network.

19 MS. ROBERTS: I have no further questions, Your
20 Honor.

21 THE COURT: The -- Ms. Brennan, you're going to get
22 a chance to redirect for a little bit, but let me just finish
23 this point. You did a sub -- subsequent report that was
24 admitted as Exhibit 14 at the end of November. And all of

1 your records -- all of your files were produced around that
2 time, right, Dr. --

3 THE WITNESS: Yes.

4 THE COURT: -- Love?

5 THE WITNESS: Yes, Your Honor.

6 THE COURT: And they're -- you -- since you're not
7 just an expert, you're treating Emily, you have records that
8 would deal with appointments and some clinical work that
9 you've done between January and August, right?

10 THE WITNESS: Correct.

11 THE COURT: And the -- because this case has gone to
12 trial and there's been eight months since the time we were
13 organizing the setting of this trial or evidentiary
14 proceeding, there may be notes that are part of your file that
15 have come after the product that you have not produced, is
16 that right?

17 THE WITNESS: Correct.

18 THE COURT: Okay. Ms. Brennan?

19 MS. BRENNAN: Yes, Judge. I prefer to take my -- be
20 more efficient with my time to review these records and start
21 tomorrow morning with my redirect because that way I'm not
22 struggling to go through all -- I -- I -- what I would like to
23 do is go through these various dates and exhibits where she's
24 mentioned something and pull those out and find what questions

1 I have because it went so quick. So I think it'll be more
2 efficient for us to conclude at this time and let me pick up
3 with her tomorrow.

4 THE COURT: You want to carry the --

5 MS. BRENNAN: Or let her --

6 THE COURT: -- ex --

7 MS. BRENNAN: -- go ahead.

8 THE COURT: You're going to carry the expert over
9 for another day? Look --

10 MS. BRENNAN: Yes.

11 THE COURT: -- the argument -- the argument is going
12 to be whether or not the expert has -- whether the expert's
13 opinion is more persuasive than the argument related to other
14 facts that were considered. Okay. So you're going to go
15 through -- I mean, you can cover what Ms. Roberts covered, but
16 it's -- it's really going to be an argument as to what is --
17 you know, what is more sufficient proof. Dr. Love -- Dr.
18 Love, we're scheduled to start at 9:00 o'clock. Are you
19 available at 9:00 o'clock tomorrow morning? So I -- I can't
20 imagine that it will take more than, you know, an hour to go
21 back and forth that way. Okay?

22 The one thing I wanted to ask you also is that you
23 just saw -- you just saw Emily on the 4th, right?

24 THE WITNESS: Yes.

1 THE COURT: And I know she's not a minor, but, you
2 know, this is a Family Court case involving a child of the
3 parties and -- and she's actually a party to this case. She's
4 been put in a position of making a financial claim against her
5 parents. But she's probably going to testify in this case and
6 it's it was represented to the Court that you would advise
7 that she not be a participate in a case until she testifies.
8 Is that accurate?

9 THE WITNESS: Yes, I -- I was afraid that I might
10 get asked about prognosis or something and -- and I just don't
11 want her hearing any of that.

12 THE COURT: Okay. All right. And but the -- yeah,
13 that's fine. I mean, I -- and what worries me is that it's
14 just not possible that we're going to be able to complete all
15 the evidence in three hours in the morning. So we'll do what
16 we can. The matter will be adjourned until 9:00 o'clock. You
17 guys were great. You were all ready to go five minutes or so
18 before we came on. We'll be ready to go right on -- on time
19 at 9:00 o'clock. And Ms. Brennan, you'll do redirect of Dr.
20 Love. And then we'll decide what we do next.

21 I would like Emily available in case we take her out
22 of order but this case cannot end without Ms. Roberts
23 examining Ms. Draper and without Dad having an opportunity to
24 testify. So, you know, the reality -- I talked to you about

1 this at the pretrial conference. You know, circumstances have
2 put the calendaring of the court in -- in difficult. I -- I
3 literally -- you know, it looks like this is a way that trials
4 are going to be conducted especially civil domestic trials or
5 any kind of civil trials for that matter. And I -- I told you
6 that if we did not go this week it might be two months before
7 we can resume with a full day. I mean, I have -- I have
8 literally about 15 or 20 evidentiary proceedings set every
9 afternoon for the next two or three months. That's just the
10 way it is. So it's not -- it's not optimum for anyone.

11 Now we -- we'll -- we come back still. We'll look
12 for a time that might come available. But the Court hears law
13 and motion probably 20 to 30 cases every week on Monday,
14 Tuesday, and Wednesday morning. So that's not going to be
15 mornings available. They furloughed the clerks which means
16 that they don't work on Fridays which means that we have to
17 try to fill in with -- clerks if we can avail -- have them
18 available for Friday morning like we're going to do tomorrow
19 morning. So this is -- we're limping along trying to manage
20 these type of cases that are important cases.

21 But the other thing I want to mention because -- I
22 mean, I've tried a lot of cases in the last couple weeks that
23 were timely and critically important. This dispute under like
24 a lot Family Court cases is just about money. It's just

1 money. Okay. So on the scale of importance for me, I -- you
2 don't have me there because I'll sort it out and I'll figure
3 out whether their financial claims have merit or don't have
4 merit and I'll deal with it. But this is not a termination of
5 parental rights case, a removal case, a school case, a custody
6 case, anything that involves like placement and other things.
7 So it's not going to take priority on my calendar. And so,
8 you know, we -- we made good progress today. We'll do the
9 best we can tomorrow. And -- and we'll take stock of the case
10 right before the noon hour. Thank you, Dr. Love. We'll see
11 you in the morning. And Counsel, thank you very much. See
12 you tomorrow.

13 MR. REED: Thank you, Your Honor.

14 MS. BRENNAN: Thank you, Your Honor.

15 THE WITNESS: Thank you.

16 (PROCEEDINGS CONCLUDED AT 4:40:52)

17 * * * * *

18 ATTEST: I do hereby certify that I have truly and
19 correctly transcribed the digital proceedings in the above-
20 entitled case to the best of my ability.

21

22

23

24

Adrian Medrano

Adrian N. Medrano

EXHIBIT 1

EXHIBIT 1

EXHIBIT 1
RESP'T APP 0267

Date: 5/14/2008

Clark County School District

Las Vegas, Nevada

CCF-600

07/05

Page 2 of 18

Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY

C REED

Grade: 05

DOB: [REDACTED]

ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES																																												
Reynolds Intellectual Assessment Scale (RIAS)	RIAS: Verbal Index: 85 SS 16th%ile Low Average Nonverbal Index: 97 SS 42nd%ile Average Composite Index: 89 SS 23rd%ile Low Average Relative strength noted in nonverbal problem-solving (visual strength). Memory Index was in the extremely low range (47 SS; <1st %ile) with poor performance in both auditory memory and visual memory. She responded in an inconsistent pattern suggesting difficulty with sustained attention	The results of the cognitive assessment show Low Average to Average scores in ability. She performed extremely low on memory tasks and demonstrated an inconsistent response pattern that suggested difficulty with sustained attention. Her performance varied between sessions and during sessions to a significant degree with her level of concentration.																																												
Test of Nonverbal Intelligence (TONI-3) (Brief)	TONI-3: Results are in the Well Below Average range with performance at the 1st %ile; SS 65. She appeared to understand the task and had performed well on sample items. Her choices appeared random during the assessment. Her performance was equivalent to a child of 5 years, 6 months compared with the test population. A second administration of the TONI-3 was given and her scores improved to the Average range (95 SS) 37th%ile.	Emily's performance on the academic assessment was well below average overall. She does demonstrate a relative strength in math applications and appears more confident when working on math. Math applications was the only subtest that showed performance on grade level. Language areas were a relative weakness, particularly listening to directions and comprehension of stories that required immediate response. Emily showed response latency to questions, even social conversation and when required to listen to taped portions of the test she had problems formulating an answer quickly. On other subtests that allowed repetition of information and did not require an immediate response, Emily had a stronger performance. In addition, when the TONI-3 was repeated 2 weeks after the initial testing, Emily improved her score to the Average range. Also, she improved her subtest scores on picture vocabulary and there was a slight improvement in listening comprehension. There does appear to be variation in performance on different days which suggests attentional concerns.																																												
Woodcock-Johnson III Tests of Achievement	WJ-III Tests of Achievement: SS: 100=Average <table><tr><td>Clusters</td><td>SS</td><td>%ile</td><td>AE/GE</td></tr><tr><td>Oral Language</td><td>42</td><td><1st</td><td>4-5/<K.0</td></tr><tr><td>Oral Expression</td><td>54</td><td><1st</td><td>4-1/<K.0</td></tr><tr><td>Listening Comprehension</td><td>42</td><td><1st</td><td>4-8/<K.0</td></tr><tr><td>Brief Achievement</td><td>77</td><td>6</td><td>8-5/3.1</td></tr><tr><td>Broad Reading</td><td>61</td><td><1st</td><td>7-6/2.2</td></tr><tr><td>Broad Math</td><td>90</td><td>26</td><td>10-1/4.7</td></tr><tr><td>Broad Written Language</td><td>75</td><td>5</td><td>8-3/2.9</td></tr><tr><td>Academic Skills</td><td>72</td><td>3</td><td>8-3/2.9</td></tr><tr><td>Academic Fluency</td><td>73</td><td>4</td><td>8-4/3.0</td></tr><tr><td>Academic Applications</td><td>79</td><td>8</td><td>8-6/3.2</td></tr></table> WJ Subtest scores will continue on the next page	Clusters	SS	%ile	AE/GE	Oral Language	42	<1st	4-5/<K.0	Oral Expression	54	<1st	4-1/<K.0	Listening Comprehension	42	<1st	4-8/<K.0	Brief Achievement	77	6	8-5/3.1	Broad Reading	61	<1st	7-6/2.2	Broad Math	90	26	10-1/4.7	Broad Written Language	75	5	8-3/2.9	Academic Skills	72	3	8-3/2.9	Academic Fluency	73	4	8-4/3.0	Academic Applications	79	8	8-6/3.2	
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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY

C REED

Grade: 05

DOB: [REDACTED]

ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES																																																																				
Woodcock-Johnson III Tests of Achievement	WJ-III continued: <table><tr><td>Subtests</td><td>SS</td><td>%ile</td><td>AE/GE</td></tr><tr><td>Letter-Word Identification</td><td>72</td><td>3</td><td>8-0/2.7</td></tr><tr><td>Reading Fluency</td><td>58</td><td><1</td><td>7-1/2.7</td></tr><tr><td>Passage Comprehension</td><td>62</td><td>1</td><td>7-1/1.8</td></tr><tr><td>Word Attack</td><td>71</td><td>3</td><td>7-0/1.7</td></tr><tr><td>Picture Vocabulary</td><td>69 (86)</td><td>2</td><td>5-5/K.1</td></tr><tr><td>Reading Vocabulary</td><td>89</td><td>23</td><td>9-4/4.0</td></tr><tr><td>Story Recall</td><td>16 (46)</td><td><1</td><td>2-1/<K</td></tr><tr><td>Understanding Directions</td><td>1</td><td><1</td><td>2-2/<K</td></tr><tr><td>Spelling</td><td>70</td><td>2</td><td>7-6/2.2</td></tr><tr><td>Writing Fluency</td><td>92</td><td>30</td><td>10-3/4.9</td></tr><tr><td>Writing Samples</td><td>82</td><td>11</td><td>8-2/2.8</td></tr><tr><td>Editing</td><td>60</td><td><1</td><td>7-3/1.9</td></tr><tr><td>Calculation</td><td>89</td><td>24</td><td>10-2/4.7</td></tr><tr><td>Math Fluency</td><td>75</td><td>5</td><td>8-2/2.8</td></tr><tr><td>Math Applications</td><td>99</td><td>47</td><td>11-1/5.7</td></tr><tr><td>Quantitative Concepts</td><td>93</td><td>31</td><td>10-3/4.8</td></tr></table>	Subtests	SS	%ile	AE/GE	Letter-Word Identification	72	3	8-0/2.7	Reading Fluency	58	<1	7-1/2.7	Passage Comprehension	62	1	7-1/1.8	Word Attack	71	3	7-0/1.7	Picture Vocabulary	69 (86)	2	5-5/K.1	Reading Vocabulary	89	23	9-4/4.0	Story Recall	16 (46)	<1	2-1/<K	Understanding Directions	1	<1	2-2/<K	Spelling	70	2	7-6/2.2	Writing Fluency	92	30	10-3/4.9	Writing Samples	82	11	8-2/2.8	Editing	60	<1	7-3/1.9	Calculation	89	24	10-2/4.7	Math Fluency	75	5	8-2/2.8	Math Applications	99	47	11-1/5.7	Quantitative Concepts	93	31	10-3/4.8	The academic results range from below kindergarten in listening skills and one-word expressive vocabulary to strengths in math application, writing fluency (sentences) and calculation. She is very inconsistent in her performance with slow processing on verbal responses to rapid performance on writing tasks that take minimal organization. Reading decoding, fluency and comprehension of text are extremely low and these areas can impact her performance in all subjects including math which is her strength. When Emily was presented with incorrect sentences and was asked to identify the errors she was not successful in recognizing mistakes in capitalization, punctuation, spelling or grammar. Even with eliminating the motoric response and using visual recognition, she was unable to recognize the errors. Picture Vocabulary is a subtest that requires the student to name a picture (one word expressive vocabulary). On the first administration, Emily scored a 69 SS which is in the Lower Extreme range. 2 weeks later, she was administered the same subtest and scored in the Low Average range. She appears to struggle with inconsistent performance and this has been noted in all assessment areas including classroom work.
Subtests	SS	%ile	AE/GE																																																																			
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Dynamic Indicators of Basic Early Literacy Skills	DIBELS: The results of oral reading fluency on a 5th grade benchmark show scores declining from the fall probe (125 words per minute) to the winter probe (51 words per minute).																																																																					
Additional Instructional Information	Fast ForWord Data: Information from the program was collected from 2/8/08 until 5/8/08. She has made steady progress in auditory sequencing and variable progress in phonological accuracy. Progress has also been noted in auditory word recognition, phonological memory and most recently in following directions. Her weaknesses are identified in phonological fluency and susta																																																																					

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY

C REED

Grade: 05

DOB: [REDACTED]

ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
<p>Academic Performance Rating Scale (APRS)</p> <p>Conners' Teacher Rating Scale</p>	<p>APRS: The teacher completed the APRS to provide information on Emily's classroom performance. Overall, she produces slightly less work than peers and is less successful with accuracy of work. She shows slightly less impulse control than peers, usually in the form of rushing through work in a hasty manner.</p> <p>CTRS: The teacher behavioral report indicates that all areas are within an average or typical range with the exception of a slight elevation in Cognitive Problems/Inattention. This subtest was in the At-Risk range and suggests that she is likely to have problems completing work, fails to give close attention to detail and may forget things she has already learned. It also suggests that academic areas are not strong.</p> <p>CPRS: The parent report also showed average results in all areas but the Cognitive Problems/Inattention subtest. The parent reports similar observations with regard to attention to detail, poor handwriting, difficulty completing work and avoidance of work that requires sustained attention.</p>	<p>The teacher reports that Emily produces or turns in 90-100% of math and language arts assignments. The accuracy of the math is 70-79% and accuracy of the written language work is 65-69%. The quality of her work is variable. She very often can follow directions both in large and small group. She is very slow to pick up new concepts or material. The quality of her writing and reading skills is poor. She very often takes more time to complete her work than peers unless she is rushing through assignments. She is able to pay attention without prompts from the teacher and never appears to be staring in space or withdrawn emotionally. She also never starts a task prematurely without waiting for directions. She does require a lot of teacher assistance in order to complete work accurately. She also has difficulty with recalling material from a previous day's lesson. The attentional concerns are noted in both the home and school behavioral report. There are no other concerns with behaviors and Emily has adequate social skills and appropriate behaviors with school expectations.</p>

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCEStudent Name: EMILY C REED Grade: 05 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
Teacher Observations	Emily has trouble following spoken directions and understanding new ideas in the classroom. She has difficulty answering questions as quickly as others, does not ask for help, and does not use a variety of vocabulary when talking. She has trouble understanding what she has read, identifying the main idea of what's read, remembering details from something read, and following written directions. Emily has difficulty writing complete sentences and expanding an answer or providing details in writing.	(see last page)
Comprehensive Assessment of Spoken Language (CASL)	<p>LANGUAGE</p> <p>The Comprehensive Assessment of Spoken Language (CASL) is a norm-referenced oral language assessment battery of tests for children and adults aged 3-21. Each of the CASL tests is individually administered and yields a standard score compared to other individuals of the same chronological age. For this standard score 100 is mean and 85-115 is considered the range of average for Emily's chronological age.</p> <p>Lexical/Semantic Category of Tests</p> <p>CASL-antonyms: the antonyms test is designed to measure the ability to identify words that are opposite in meaning and to be able to retrieve, generate and produce a single word when its opposite is given as a stimulus. Emily's standard score of 88 is considered low average.</p> <p>CASL-synonyms: This test is designed in a multiple choice format to allow the student to recognize from a list of words the word that would have the same meaning or that is sufficiently alike in meaning to be substituted for the stimulus word. Emily's standard score of 100 is considered average.</p>	

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 05 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
CASL cont.	<p>Syntactic Category of Tests</p> <p>CASL-syntax construction: this test is designed to assess the ability to generate sentences with an emphasis on the use of the rules that govern sentence formulation and expression. These include basic sentence types and verb tense rules. Emily's standard score of 95 is considered average.</p> <p>CASL-grammatical morphemes: this test measures the metalinguistic knowledge of the form and meaning of the grammatical morphemes in the English language. Morphemes are words or word endings that add meaning to sentences such as plurals, possessives, pronouns, derivational suffixes, etc... Emily's standard score of 91 is considered average.</p> <p>CASL-sentence comprehension: This test measures the ability to comprehend the meaning of the structure organization of sentences. It assesses the ability to comprehend sentence types such as simple, complex, and embedded declarative sentences with one or more phrase/clause and grammatical structures including active/passive voice, direct/indirect objects, possessive forms, prepositions and negatives. It also assesses the ability to comprehend word order when such order distinguishes meaning. Emily's standard score of 86 is considered low average. Analysis of Emily's responses indicated difficulty comprehending passive voice, indirect objects, changes in ordering of words and phrases in sentences, and complex sentences with one or more kinds of phrases or clause constructions.</p>	(see last page)

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PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 05 DOB: [REDACTED] ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
CASL cont.	<p>Supralinguistic Category of Tests CASL-nonliteral language: this test is designed to assess the ability to comprehend nonliteral language in the form of figurative speech, indirect requests, and sarcasm. The student must be able to recognize that spoken language cannot always be interpreted in a literal manner and then give an explanation of how the spoken language was intended to be interpreted. Emily's standard score of 103 is considered average.</p> <p>Pragmatic Category of Tests CASL-pragmatic judgment: this test is designed to measure the knowledge and use of pragmatic rules of language by having the student judge the appropriateness of language used in a specific situation or to actually respond with appropriate language for a given situation. Emily's standard score of 100 is considered average.</p> <p>Emily's core composite score of 91 is considered average.</p>	<p>Results of this assessment indicate receptive and expressive language weaknesses. Although her understanding of vocabulary appeared to be average, Emily was slow to retrieve words. She demonstrated difficulty comprehending the meaning of the syntactic-structure organization of sentence which can make it difficult for her to comprehend directions and explanations provided by the classroom teacher.</p>

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Date: 5/21/2008

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Student Support Services Division

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08/07
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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
STRENGTHS, CONCERNS, INTERESTS AND PREFERENCES**

Student Name: EMILY C REED Grade: 05 DOB: [REDACTED] ID #: [REDACTED]

STATEMENT OF STUDENT STRENGTHS

Emily is a very sweet girl and always eager to help. Emily is always willing to try her best at all tasks.

STATEMENT OF PARENT EDUCATIONAL CONCERNS

Parents are concerned that Emily graduate high school with the ability to go to college. They want Emily to be challenged academically.

STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS

(required if transition services will be discussed, beginning at age 14 or younger if appropriate)

If student was not in attendance, describe the steps taken to ensure that the student's preferences and interests were considered:

Emily enjoys socializing with her friends and working in the bakery.

CONSIDERATION OF SPECIAL FACTORS

- | | |
|--|---|
| 1. Does the student's behavior impede the student's learning or the learning of others?
If YES, team must provide positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 2. Does the student have limited English proficiency?
If YES, team must consider language needs of the student as those needs relate to the student's IEP. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 3. Is the student blind or visually impaired?
If YES, team must evaluate reading and writing needs and provide for instruction in Braille unless determined not appropriate for the student. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 4. Is the student deaf or hard of hearing?
If YES, team must consider communication needs. | <input type="checkbox"/> No action needed. <input checked="" type="checkbox"/> Yes, addressed in IEP. |
| 5. Does the student require assistive technology devices and services?
If YES, team must determine nature and extent of devices and services. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |

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ER 001295

Las Vegas, Nevada

Student Support Services Division

**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
SERVICES (RS)**

Student Name: EMILY

C REED

Grade: 05

DOB: |

ID #:

RELATED SERVICES

RELATED SERVICE	SERVICE TYPE AND/OR DESCRIPTION	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Speech/Language Therapy	Consult	5/21/2008 -5/21/2009	30 Min/Mo	Gen Ed. class/R.R.
		-		
Assistive Technology	Assess	5/21/2008 -9/21/2008		
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<input type="checkbox"/> Transportation		-		
<input type="checkbox"/> Transportation		-		

EXTENDED SCHOOL YEAR SERVICES

Does the student require extended year services? ☐ Yes ☒ No ☐ Deferred

If YES, IEP goals and benchmarks/short-term objectives and/or related services to be implemented in ESY must be identified.

If need for ESY is to be determined at a later date, indicate date by which IEP decision will be made:

METHOD FOR REPORTING PROGRESS

METHOD FOR REPORTING OF THE STUDENT'S PROGRESS TOWARD MEETING ANNUAL GOALS (check all methods that will be used)

☒ IEP Goals Page ☒ District Report Card ☒ Specialized Progress Report ☐ Parent Conferences
☒ Other: weekly progress report

PROJECTED FREQUENCY OF REPORTING ☐ Semester

☐ Quarterly ☐ Trimester
☒ Other: same as peers

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ER 001297

Date: 5/21/2008

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Las Vegas, Nevada

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Student Support Services Division

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP) ACCOMMODATIONS AND MODIFICATIONS

Student Name: EMILY

C REED

Grade: 05 DOB: [REDACTED]ID # [REDACTED]

SUPPLEMENTARY AIDS AND SERVICES

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Student will sit near area of instruction, away from ambient noise	5/21/2008 - 5/21/2009	all academic areas	classroom setting
Directions must be simplified/shortened & may repeat them back to teacher to check for comprehension	5/21/2008 - 5/21/2009	all academic areas	classroom setting
May take tests orally, may retake failed tests for a C if effort given	5/21/2008 - 5/21/2009	all academic areas	classroom setting
Assignments and tests may be shortened/modified	5/21/2008 - 5/21/2009	all academic areas	classroom setting
Student may have extended time to complete assignments (up to 2x amount)	5/21/2008 - 5/21/2009	all academic areas	classroom setting
Grades will be determined by Gen. Ed. and Special Ed. teachers	5/21/2008 - 5/21/2009	marking period	classroom setting
Allow extra time to formulate responses. Give semantic relationships for vocab. to help retrieval	5/21/2008 - 5/21/2009	all academic areas	classroom setting

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
<input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	

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RESP'T APP 0278

ER 001298

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Student Support Services Division

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP) ACCOMMODATIONS AND MODIFICATIONS

Student Name: EMILY

C REED

Grade: 05DOB: ID #:

SUPPLEMENTARY AIDS AND SERVICES

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Emily may use the computer for writing tasks	5/21/2008 - 5/21/2009	writing tasks	classroom setting
may go to Resource Room for testing	5/21/2008 - 5/21/2009	academic areas	classroom setting
provide teacher made notes for student	5/21/2008 - 5/21/2009	academic areas	classroom setting
extra set of textbooks for home	5/21/2008 - 5/21/2009	academic areas	classroom setting
agenda checked daily by teacher and at home	5/21/2008 - 5/21/2009	academic areas	classroom setting
modeling, cueing, visual prompts provided during instruction	5/21/2008 - 5/21/2009	academic areas	classroom setting
FM system will be provided and maintained by CCSD	5/21/2008 - 5/21/2009	academic areas	classroom setting

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time <input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
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RESP'T APP 0279

ER 001299

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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 5 DOB: ID #:

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will read aloud with fluency, accuracy, appropriate intonation, and expression achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests, as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first quarter of 2008-2009 school year, in a classroom setting, EMILY will Decode regular multi-syllable words achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 2	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Read the passage at a fluent rate achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use knowledge of complex word families to decode unfamiliar words when reading achieving a criteria of 85% as implemented by Special Education and General Education Staff
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will select and apply strategies to solve a variety of practical and math problems achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Determine how and when to break a problem into simpler parts achieving a criteria of 85% as implemented by Special Education and General Education Staff
# 2	By annual review date, in a classroom setting, EMILY will Determine the approach and operation needed to successfully complete the problem achieving a criteria of 85% as implemented by Special Education and General Education Staff
#	
#	

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RESP'T APP 0280

ER 001300

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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 5 DOB: ID #:

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)

By annual review date, in a classroom setting, EMILY will revise drafts, using an established rubric to improve the coherence and logical progression of ideas achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff

☐ Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

☐ Training/Education ☐ Employment ☐ Independent Living Skills ☐ Other

☐ Check here if this goal will be addressed during Extended Year Services (ESY)

BENCHMARK OR SHORT-TERM OBJECTIVE

# 1	By end of first quarter of 2008-2009 school year, in a classroom setting, EMILY will Proofread 5 sentences at 4th grade level for errors in grammar, capitalization, and punctuation achieving a criteria of 85% as implemented by Special Education and General Education Staff
# 2	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Revise writing to improve organization achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Revise writing to improve organization and word choice after checking the logic of the ideas and precision of the vocabulary achieving a criteria of 85% as implemented by Special Education and General Education Teacher
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)

By annual review date, in a classroom setting, EMILY will identify and compare main ideas and important concepts of texts achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff

☐ Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

☐ Training/Education ☐ Employment ☐ Independent Living Skills ☐ Other

☐ Check here if this goal will be addressed during Extended School Year Services (ESY)

BENCHMARK OR SHORT-TERM OBJECTIVE

# 1	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Paraphrase the ideas achieving a criteria of 85% as implemented by Special Education and General Education Teacher By annual review date, in a classroom setting,
# 2	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Identify the main idea of the text and will identify statements within that text which support that main idea achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Discern main ideas and concepts presented in text, identifying and assessing evidence that supports those ideas achieving a criteria of 85% as implemented by Special Education and General Education Teacher
#	

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ER 001301

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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 5 DOB: [REDACTED] ID #: [REDACTED]

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will use summarizing, note-taking, outlining to comprehend information achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Outline text achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 2	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Take notes while reading achieving a criteria of 85% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use summarizing techniques achieving a criteria of 85% as implemented by Special Education and General Education Teacher
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will use self-advocacy skills in all areas achieving a criteria of 85% as measured by observation and documentation as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By annual review date, in a classroom setting, EMILY will Appropriately request accommodations from regular class teachers achieving a criteria of 85% as implemented by Special Education and General Education Staff
# 2	By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Ask for help with difficult assignments achieving a criteria of 85% as implemented by Special Education and General Education Staff
#	
#	

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RESP'T APP 0282

ER 001302

Date: 5/21/2008

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCP-587
08/07
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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 5 DOB: [REDACTED] ID #: [REDACTED]

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)

By annual review date, in a classroom setting, EMILY will make inferences about character traits; make predictions about conflicts and resolutions achieving a criteria of 85% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff

☐ Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

☐ Training/Education ☐ Employment ☐ Independent Living Skills ☐ Other _____

☐ Check here if this goal will be addressed during Extended Year Services (ESY)

BENCHMARK OR SHORT-TERM OBJECTIVE

- | | |
|-----|---|
| # 1 | By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Distinguish among facts, supported inferences, and opinions in text achieving a criteria of 85% as implemented by Special Education and General Education Staff |
| # 2 | By end of second quarter of 2008-2009 school year, in a classroom setting, EMILY will Extract significant information from text as needed, including problems and solutions achieving a criteria of 85% as implemented by Special Education and General Education Staff |
| # 3 | By annual review date, in a classroom setting, EMILY will Answer literal and inferential questions on a passage at 4th grade level achieving a criteria of 85% as implemented by Special Education and General Education Staff |
| # | |

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)

Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

Training/Education Employment Independent Living Skills Other _____

Check here if this goal will be addressed during Extended School Year Services (ESY)

BENCHMARK OR SHORT-TERM OBJECTIVE

- | | |
|---|--|
| # | |
| # | |
| # | |
| # | |

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RESP'T APP 0283

ER 001303

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP) PLACEMENT

Student Name: EMILY C REED Grade: 05 DOB: [REDACTED] ID #: [REDACTED]
PLACEMENT: 05/21/2008 to 06/04/2008 Total minutes per week in school: 1,855

PLACEMENT CONSIDERATIONS		PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT
<u>Selected</u>	<u>Rejected</u>	
<input checked="" type="checkbox"/>	<input type="checkbox"/> Regular class with supplementary aids and services (no removal)	<u>100.00</u> %
<input type="checkbox"/>	<input type="checkbox"/> Regular class and special education class (e.g. resource) combination	
<input type="checkbox"/>	<input type="checkbox"/> Self-contained program	
<input type="checkbox"/>	<input type="checkbox"/> Special School	
<input type="checkbox"/>	<input type="checkbox"/> Residential	
<input type="checkbox"/>	<input type="checkbox"/> Hospital	
<input type="checkbox"/>	<input type="checkbox"/> Home	
<input type="checkbox"/>	<input type="checkbox"/> Other: _____	
JUSTIFICATION FOR PLACEMENT INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS*		
<p>*Regular education environments include academic classes (which might include field trips linked to the curriculum), nonacademic settings (such as recess), and extra-curricular activities (for example, sports, after-school clubs, band, etc.).</p>		
IEP IMPLEMENTATION		
<input checked="" type="checkbox"/> As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect. <input type="checkbox"/> As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent. <input type="checkbox"/> Parent not in attendance. <input type="checkbox"/> Parent participated via telephone. <input type="checkbox"/> A copy of this IEP was provided to the student's parent on: <u>5-21-08</u> by: <u>Alexander</u> <div style="text-align: center;">(date) (name) (title)</div> Parent Signature: <u>Alexander</u>		

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☒ Additional Form Needed
2nd Copy - Special Education Teacher/School

RESP'T APP 0284

ER 001304

Date: 05/21/2008

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-606
08/07

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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
PLACEMENT**

Student Name: EMILY C REED Grade: 05 DOB: [REDACTED] ID # [REDACTED]
 PLACEMENT: 08/25/2008 to 05/21/2009 5/21/2009 Total minutes per week in school: 1,855

PLACEMENT CONSIDERATIONS		PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT
Selected <input type="checkbox"/> Regular class with supplementary aids and services (no removal) <input checked="" type="checkbox"/> Regular class and special education class (e.g. resource) combination <input type="checkbox"/> Self-contained program <input type="checkbox"/> Special School <input type="checkbox"/> Residential <input type="checkbox"/> Hospital <input type="checkbox"/> Home <input type="checkbox"/> Other: _____	Rejected <input checked="" type="checkbox"/> Regular class with supplementary aids and services (no removal) <input type="checkbox"/> Regular class and special education class (e.g. resource) combination <input type="checkbox"/> Self-contained program <input type="checkbox"/> Special School <input type="checkbox"/> Residential <input type="checkbox"/> Hospital <input type="checkbox"/> Home <input type="checkbox"/> Other: _____	<u>34.00</u> %

JUSTIFICATION FOR PLACEMENT INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS*

Due to Emily's need for specialized instruction in reading, writing, and mathematics, she requires placement in General Education and Resource Room for part of the day. The smaller class size in the Resource Room may provide Emily with the modifications she needs to succeed. Emily may require clarification of grade level instruction to meet the scope of the General Education curriculum. Emily may demonstrate success by receiving assistance from the Resource Room teacher in a smaller class setting. To avoid any disruption in the General Education setting, Emily may receive clarification from the Special Education teacher in the Resource Room. As with any placement that removes a student from the General Education setting, Emily will be monitored for adverse effects related to limited exposure to typical peers and grade level curriculum.

*Regular education environments include academic classes (which might include field trips linked to the curriculum), nonacademic settings (such as recess), and extra-curricular activities (for example, sports, after-school clubs, band, etc.).

IEP IMPLEMENTATION

☒ As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect.

☐ As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent.

☐ Parent not in attendance.

☐ Parent participated via telephone.

☐ A copy of this IEP was provided to the student's parent on: 5-21-08 by: _____
 (date) (name) (title)

Parent Signature: [Signature]

☐ Additional Form Needed

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RESP'T APP 0285

ER 001305

DATE: 4/27/2009

Clark County School District
Las Vegas, Nevada
Student Support Services Division

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INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
INFORMATION

STUDENT/PARENT INFORMATION			
Student: <u>EMILY</u>	<u>C REED</u>	Sex: <u>F</u>	Birth Date: <u> </u> Grade: <u>06</u>
Student ID: <u> </u>	Student Primary Language: <u>ENGLISH</u>	Student English Proficiency Code (optional): <u>EE</u>	
Address: <u> </u> (mother) <u> </u> (father) <u> </u>			
City/State/Zip: <u> </u>		Student Phone: <u> </u>	
Parent/Guardian/Surrogate: <u>Alecia</u>	<u>Kremidas</u>	Parent Phone (Home): <u> </u>	
Parent Phone (Work): <u> </u>	Email Address: <u> </u>		
Optional (Cell): <u> </u>	Primary Language Spoken at Home: <u>ENGLISH</u>		
Interpreter or Other Accommodations Needed: <u> </u>			
Emergency Contact/Phone Number: <u> </u>			
Current School: <u>Rogich Sig MS</u>		Zoned School: <u>Rogich Sig MS</u>	
ELIGIBILITY CATEGORY			
Primary: <u>Hearing Impairment</u>		Other: <u>Specific Learning Disability</u>	
ELIGIBILITY DATE: <u>5/14/2008</u>		ANTICIPATED 3-YR REEVALUATION: <u>5/14/2011</u>	
MEETING INFORMATION			
DATE OF MEETING: <u>4/27/2009</u>		DATE OF LAST IEP MEETING: <u>5/21/2008</u>	
PURPOSE OF MEETING:			
<input type="checkbox"/> Interim IEP	<input checked="" type="checkbox"/> Annual IEP	<input type="checkbox"/> Revision To IEP Dated: <u> </u>	
<input type="checkbox"/> Initial IEP	<input type="checkbox"/> IEP Following 3-Yr Reevaluation	<input type="checkbox"/> Exit/Graduation Reason: <u> </u>	
<input type="checkbox"/> IEP Revision without a meeting:		<input type="checkbox"/> Other: <u> </u>	
At the request of: <input type="checkbox"/> Parent or <input type="checkbox"/> School District			
IEP SERVICES WILL BEGIN: <u>4/27/2009</u>		ANTICIPATED DURATION OF SERVICES: <u>4/27/2010</u>	
IEP REVIEW DATE: <u>4/27/2010</u>		COMMENTS: <u> </u>	
IEP PARTICIPATION			
Parent/Guardian/Surrogate*	<u>A. Kremidas</u>	Speech/Lang Pathologist	<u>L. Avne</u>
Student**		Teacher of Deaf/Hard of Hearin	<u>T. Moran</u>
LEA Rep.*	<u>S. Fershleiser</u>		
Spec. Ed Teacher***	<u>K. Wells</u>		
Reg. Ed Teacher***	<u>T. Anderson</u>		
Parent	<u>B. Kremidas</u>		
* Required participant;			
** Student must be invited when transition is discussed (beginning at age 14 or younger if appropriate).			
*** The IEP team must include at least one regular education teacher of the student (if the student is, or may be, participating in the regular education environment).			
PROCEDURAL SAFEGUARDS			
<input checked="" type="checkbox"/> I have received a statement of procedural safeguards under the Individuals With Disabilities Education Act (IDEA) and these rights have been explained to me in my primary language.			
<input type="checkbox"/> I received the Middle/High School Graduate profile.			
<input checked="" type="checkbox"/> N/A prior to 14 years of age			
Parent/Guardian Signature: <u>Alecia Kremidas</u>			
AT LEAST ONE YEAR PRIOR TO REACHING AGE 18, STUDENTS MUST BE INFORMED OF THEIR RIGHTS UNDER IDEA AND ADVISED THAT THESE RIGHTS WILL TRANSFER TO THEM AT AGE 18.			
<input checked="" type="checkbox"/> Not applicable. Student will not be 18 within one year, and the student's next annual IEP meeting will occur no later than the student's 17th birthday.			
<input type="checkbox"/> The student has been informed of his/her rights under IDEA and advised of the transfer of these rights at age 18.			

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RESP'T APP 0286

ER 001306

Date: 4/27/2009

Clark County School District

Las Vegas, Nevada

CCF-600
07/05

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY

C REED

Grade: 06

DOB: [REDACTED]

ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES																
KTEA (Kaufman Test of Educational Achievement, II)	<p>KTEA Results</p> <table><tr><td></td><td>SS%</td><td>GE</td><td>AE</td></tr><tr><td>Math</td><td>97</td><td>6.3</td><td>11:8</td></tr><tr><td>Reading</td><td>85</td><td>4.6</td><td>9:0</td></tr><tr><td>Writing</td><td>66</td><td>6.1</td><td>11:8</td></tr></table>		SS%	GE	AE	Math	97	6.3	11:8	Reading	85	4.6	9:0	Writing	66	6.1	11:8	<p>The 6th grade math curriculum includes the reading, writing, adding, subtracting, multiplying and dividing using decimals, fractions, and percents. Apply multi-step, integrated, mathematical problem-solving problems.</p>
	SS%	GE	AE															
Math	97	6.3	11:8															
Reading	85	4.6	9:0															
Writing	66	6.1	11:8															
Teacher Observations	<p>MATH Emily scored right at grade level. Presently she is in the resource math class. Both the math teacher and teacher of record feel that Emily would benefit from a co-taught grade level math class next year. Currently she is performing work at the grade level in her math class.</p> <p>READING Emily scored a little below grade level for both comprehension and decoding of words.</p> <p>WRITING Emily scored at grade level for writing. Simple grammar/punctuation errors, for grade level that is to be expected.</p> <p>READ 180 Currently, Emily is in a co-taught Read 180 class for reading and English. She has shown much improvement for writing and participation in class. Her comprehension still needs improvement, but both teachers believe Emily would benefit in another reading class that will have a co-teacher in it. English would be better suited with general education in a co-taught setting for next year as well.</p> <p>SCIENCE Emily is a very hard worker. She tries her best at everything in class. She comprehends directions (the FM system is used in class).</p>	<p>The 6th grade reading curriculum involves being able to identify and interpret literal and figurative language in text and use context clues to determine the meanings of words. Read/follow multi-step directions to perform procedures or complete tasks. Given Emily's reading abilities, she will have some difficulty with grade level text for comprehension and pronunciation of words.</p> <p>The 6th grade writing curriculum includes using the eight parts of speech in writing, identifying differences between literal and figurative language in text, formulating research questions from topics and writing compositions in the descriptive, narrative, expository and persuasive modes. Given Emily's writing levels she will have difficulty with composing essays at grade level. Assistance from a co-teacher would benefit at the grade level English class for next year.</p> <p>For Emily's success in the general education classrooms next year: All classes should have: Shortened/modified assignments, Skeleton for writing assignments (science/social studies) Copy of teacher made notes/overhead Seated close to source of instruction Ability to retake tests/quizzes orally if a "D" or lower is received, one week after grade given FM System provided to improve Emily's hearing disability Ability to use a computer for written assign</p>																

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RESP'T APP 0287

ER 001307

Date: 4/27/2009

Clark County School District
Las Vegas, Nevada

CCF-600
07/05
Page 3 of 10

Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 06 DOB: [REDACTED] ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
Teacher Observations	<p>STUDY SKILLS Emily is always prepared for class. She has been completing her homework and study skills class work. She is a pleasure to have in class.</p>	<p>Study/Organization Skills The 6th grade curriculum includes the expectation of time management and organizing information.</p> <p>Social/Behavioral A sixth grader is expected to follow directions, stay on task, demonstrate self control, and participate in classroom and school expectations.</p> <p>For Emily's success in the general education classrooms next year: All classes should have: Shortened/modified assignments, Skeleton for writing assignments (science/social studies) Copy of teacher made notes/overhead Seated close to source of instruction Ability to retake tests/quizzes orally if a "D" or lower is received, one week after grade given FM System provided to improve Emily's hearing disability Ability to use a computer for written assignments</p>
Audiological Evaluation (04/08)	<p>Testing revealed a mild sensory-neural hearing loss. CCSD Audiology provided Emily with an FM system which she uses primarily during science class.</p>	<p>Children with this type of hearing loss may have difficulty hearing soft speech, speech at a distance and speech in the presence of background noise.</p>

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RESP'T APP 0288

ER 001308

Date: 4/27/2009

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-612
08/07

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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
STRENGTHS, CONCERNS, INTERESTS AND PREFERENCES**

Student Name: EMILY C REED Grade: 06 DOB: [REDACTED] ID #: [REDACTED]

STATEMENT OF STUDENT STRENGTHS

Emily is a very sweet girl and always eager to help. Emily is always willing to try her best at all tasks.

STATEMENT OF PARENT EDUCATIONAL CONCERNS

Parents are wanting her to have confidence with self. Practice advocating for herself, they would like her to be challenged.

STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS

(required if transition services will be discussed, beginning at age 14 or younger if appropriate)

If student was not in attendance, describe the steps taken to ensure that the student's preferences and interests were considered:

Emily enjoys socializing with her friends and working in the bakery.

CONSIDERATION OF SPECIAL FACTORS

1. Does the student's behavior impede the student's learning or the learning of others?
If YES, team must provide positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior. ☒ No action needed. ☐ Yes, addressed in IEP.
2. Does the student have limited English proficiency?
If YES, team must consider language needs of the student as those needs relate to the student's IEP. ☒ No action needed. ☐ Yes, addressed in IEP.
3. Is the student blind or visually impaired?
If YES, team must evaluate reading and writing needs and provide for instruction in Braille unless determined not appropriate for the student. ☒ No action needed. ☐ Yes, addressed in IEP.
4. Is the student deaf or hard of hearing?
If YES, team must consider communication needs. ☐ No action needed. ☒ Yes, addressed in IEP.
5. Does the student require assistive technology devices and services?
If YES, team must determine nature and extent of devices and services. ☒ No action needed. ☐ Yes, addressed in IEP.

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RESP'T APP 0289

ER 001309

Date: 4/27/2009

Clark County School District

Las Vegas, Nevada

CCF-537.1

08/07

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Student Support Services Division

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP) ACCOMMODATIONS AND MODIFICATIONS

Student Name: EMILY C REED Grade: 06 DOB: ID #: **SUPPLEMENTARY AIDS AND SERVICES**

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
FM System provided and maintained by CCSD- seated close to source of instruction	4/27/2009 - 4/26/2010	Daily	All classes
Repeat directions for clarification and comprehension of tasks	4/27/2009 - 4/26/2010	Instructional Time	All classes
Retake tests/quizzes ORALLY if "D" or lower, one wk after grades are given out, per student request	4/27/2009 - 4/26/2010	Chapter Tests/Quizzes	All classes
Assignments and tests may be shortened/modified & extended time to complete assignments & Tests (2x)	4/27/2009 - 4/26/2010	CW/HW/Ch. Tests	All classes
Ability to use computer/alpha smart for written assignments	4/27/2009 - 4/26/2010	Assignments	Science/Social Studies/English/Reading
Grades will be determined by Gen. Ed. and Special Ed. teachers	4/27/2009 - 4/26/2010	Grading Period	School campus
Copy of NOTES/Overheads available to student, PRE-teach vocabulary in science/social studies	4/27/2009 - 4/26/2010	Instructional Time	All classes- Vocab-science&social studie

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
<input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	

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RESP'T APP 0292

ER 001312

Date: 4/27/2009

Clark County School District
Las Vegas, Nevada
Student Support Services Division

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08/07
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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 6 DOB: ID #:

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will read aloud with fluency, accuracy, appropriate intonation, and expression achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests, as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2009-2010 school year, in a classroom setting, EMILY will Decode regular multi-syllable words achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 2	By end of second semester of 2009-2010 school year, in a classroom setting, EMILY will Read the passage at a fluent rate achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use knowledge of complex word families to decode unfamiliar words when reading achieving a criteria of 70% as implemented by Special Education and General Education Staff
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will revise drafts, using an established rubric to improve the coherence and logical progression of ideas achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2009-2010 school year, in a classroom setting, EMILY will Proofread 5 sentences for errors in grammar, capitalization, and punctuation achieving a criteria of 70% as implemented by Special Education and General Education Staff
# 2	By end of second semester of 2009-2010 school year, in a classroom setting, EMILY will Revise writing to improve organization achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Revise writing to improve organization and word choice after checking the logic of the ideas and precision of the vocabulary achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

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RESP'T APP 0293

ER 001313

Date: 4/26/2009

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-587
08/07
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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 6 DOB: [REDACTED] ID #: [REDACTED]

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will identify and compare main ideas and important concepts of texts achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2009-2010 school year, in a classroom setting, EMILY will Paraphrase the ideas achieving a criteria of 70% as implemented by Special Education and General Education Teacher By annual review date, in a classroom setting,
# 2	By end of second semester of 2009-2010 school year, in a classroom setting, EMILY will Identify the main idea of the text and will identify statements within that text which support that main idea achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Discern main ideas and concepts presented in text, identifying and assessing evidence that supports those ideas achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will use summarizing, note-taking, outlining to comprehend information achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By annual review date, in a classroom setting, EMILY will Outline text achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 2	By annual review date, in a classroom setting, EMILY will Take notes while reading achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use summarizing techniques achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

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RESP'T APP 0294

ER 001314

ER 001315

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada

CCF-600

07/05

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCEStudent Name: EMILY C REED Grade: 07 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES								
MDT dated 5/14/2008	MDT dated 5/14/2008 states that Emily qualifies for Special Education under the category of Hearing Impaired and a secondary qualification for Specific Learning Disability in the areas of mathematical expression, basic reading skills, reading comprehension, reading fluency skills, mathematical calculation, mathematical problem solving, listening comprehension and oral expression.	i								
File Review, observation and Audiogram (4/24/08)	Emily's hearing loss was identified in 2008. She presents with a mild level, bilateral hearing loss. Emily wears her personal hearing aids consistently. She has access to an FM system in school.	A typical student with this type of hearing loss should experience no inconvenience in a school situation. Students may experience difficulty with soft speech, increased distance from the speaker and increasing level of background noise. Students should have a hearing test annually to monitor the stability of the hearing loss. The staff should consult with Teacher for the Hearing-Impaired to develop, review and implement accommodations/ modifications for Emily.								
KTEA (Kaufman Test of Educational Achievement, second edition) 4/7/2010	<p>Test Results</p> <table><tr><td>SS%</td><td></td></tr><tr><td>Reading</td><td>89</td></tr><tr><td>Math</td><td>111</td></tr><tr><td>Writing</td><td>79</td></tr></table> <p>Reading Emily has shown much improvement in reading since testing last year. She applied a lot of strategies taught to her while completing the reading comprehension. Word recognition was higher, though she struggled on some of the words.</p> <p>Math This is Emily's strongest area for academics. She improved a lot since last year. She took her time to answer questions she was not sure about and would get them correct. She is working to her potential and is at grade level for math.</p>	SS%		Reading	89	Math	111	Writing	79	<p>Reading Seventh grade reading curriculum expectations require that students identify main idea and differentiate from the supporting evidence or details. Comprehend, build, and extend vocabulary using context clues and apply knowledge of content-specific vocabulary in text to build comprehension. Given Emily's reading levels she will have difficulty some of the grade level text without assistance.</p> <p>Math Seventh grade math curriculum requires students to be able to translate among fractions, decimals, and percents, including fractional percents. Calculate with integers and other rational numbers to solve mathematical and practical solutions.</p>
SS%										
Reading	89									
Math	111									
Writing	79									

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RESP'T APP 0297**ER 001317**

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada

CCF-600
07/05

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 07 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
KTEA results continued Teacher Observations	<p>Writing Emily has improved in this area since last year. It is still her weakest area, but has grown a lot. Again, she applied strategies that have been taught to her in her English class. Spelling was the hardest area for her to get correct. General conventions (grammar, punctuation) that were once a deficit are now showing improvement.</p> <p>Math Teacher states that Emily is a great student. She asks questions when she doesn't understand, she appears to be organized. She participates in class regularly. The teacher has noticed that she works a little slower than the other students.</p> <p>Reading Emily's teacher states that she has good attendance, makes up her work, works hard and participates in class. She sometimes needs assistance more one on one with directions for clarification. She is not a behavior problem in this class at all.</p> <p>English Teacher states she works really hard, however, at a slower pace. She struggles with grammar and writing, but she has come a LONG way. She again needs more one on one assistance with direction for clarification. She doesn't participate as much in English as she does in reading. She is not a behavior problem in this class at all either.</p>	<p>Written Expression Students in the 7th grade are expected to write informative papers, write responses to literature and write summaries of procedures. Students should be able to edit writing for correct use of mechanics, word usage, and sentence structure. Given Emily's writing levels she will have difficulty completing some grade level assignments without assistance and modification.</p> <p>Math This one-year course is designed to increase mathematical fluency in problem solving, logic, reasoning, and effective communication. This course builds on the concepts of number operations with integers, decimals, and rational numbers, problem solving and reasoning skills, data analysis, probability, geometry, measurement, spatial relationships, patterns, and algebraic concepts.</p> <p>Reading This one-year course reinforces the development of strategic reading behaviors. Instructional practices will incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to society.</p> <p>English This one-year course emphasizes strengthening reading, writing, and critical thinking skills. Grammar, usage, and mechanics will be taught as essential elements of writing as a process. Selections from literature will be used as models for writing. Instructional practices will incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to society.</p>

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RESP'T APP 0298**ER 001318**

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-612
08/07

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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
STRENGTHS, CONCERNS, INTERESTS AND PREFERENCES**

Student Name: EMILY C REED Grade: 07 DOB: [REDACTED] ID #: [REDACTED]

STATEMENT OF STUDENT STRENGTHS

Emily is a very sweet girl and always eager to help. Emily is always willing to try her best at all tasks. Math is her strongest academic area. She has grown academically since last year. There are a lot of improvements.

STATEMENT OF PARENT EDUCATIONAL CONCERNS

Parent concerns getting her to graduate high school successfully. Impressed with her improvement in confidence, academics. Wanting her to keep up the pace she is at to be successful.

STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS

(required if transition services will be discussed, beginning at age 14 or younger if appropriate)

If student was not in attendance, describe the steps taken to ensure that the student's preferences and interests were considered:

Emily enjoys socializing with her friends and working in the bakery.

CONSIDERATION OF SPECIAL FACTORS

- | | |
|--|---|
| 1. Does the student's behavior impede the student's learning or the learning of others?
If YES, team must provide positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 2. Does the student have limited English proficiency?
If YES, team must consider language needs of the student as those needs relate to the student's IEP. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 3. Is the student blind or visually impaired?
If YES, team must evaluate reading and writing needs and provide for instruction in Braille unless determined not appropriate for the student. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 4. Is the student deaf or hard of hearing?
If YES, team must consider communication needs. | <input type="checkbox"/> No action needed. <input checked="" type="checkbox"/> Yes, addressed in IEP. |
| 5. Does the student require assistive technology devices and services?
If YES, team must determine nature and extent of devices and services. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |

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RESP'T APP 0299

ER 001319

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-587
08/07

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IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

Student Name: EMILY C REED Grade: 7 DOB: ID #:

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will read aloud with fluency, accuracy, appropriate intonation, and expression achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests, as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2010-2011 school year, in a classroom setting, EMILY will Decode regular multi-syllable words achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 2	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will Read the passage at a fluent rate achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use knowledge of complex word families to decode unfamiliar words when reading achieving a criteria of 70% as implemented by Special Education and General Education Staff
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will revise drafts, using an established rubric to improve the coherence and logical progression of ideas achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2010-2011 school year, in a classroom setting, EMILY will Proofread 5 sentences for errors in grammar, capitalization, and punctuation achieving a criteria of 70% as implemented by Special Education and General Education Staff
# 2	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will Revise writing to improve organization achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Revise writing to improve organization and word choice after checking the logic of the ideas and precision of the vocabulary achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

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RESP'T APP 0300

ER 001320

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-587
08/07Page 6 of 11

**IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR
SHORT-TERM OBJECTIVES**

Student Name: EMILY C REED Grade: 7 DOB: [REDACTED] ID #: [REDACTED]

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will identify and compare main ideas and important concepts of texts achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of first semester of 2010-2011 school year, in a classroom setting, EMILY will Paraphrase the ideas achieving a criteria of 70% as implemented by Special Education and General Education Teacher By annual review date, in a classroom setting,
# 2	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will Identify the main idea of the text and will identify statements within that text which support that main idea achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Discern main ideas and concepts presented in text, identifying and assessing evidence that supports those ideas achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will use summarizing, note-taking, outlining to comprehend information achieving a criteria of 70% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By annual review date, in a classroom setting, EMILY will Outline text achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 2	By annual review date, in a classroom setting, EMILY will Take notes while reading achieving a criteria of 70% as implemented by Special Education and General Education Teacher
# 3	By annual review date, in a classroom setting, EMILY will Use summarizing techniques achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	

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RESP'T APP 0301

ER 001321

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-537.1

08/07

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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
ACCOMMODATIONS AND MODIFICATIONS**

Student Name: EMILY C REED Grade: 07 DOB: ID #

SUPPLEMENTARY AIDS AND SERVICES

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
FM System provided & maintained by school dist- Hearing loss information provided to staff	4/14/2010 - 4/13/2011	Daily / Beginning of Year	General Ed Classes /School Campus
Repeat directions for clarification and comprehension of tasks- seated near source of instruction	4/14/2010 - 4/13/2011	Instructional Time	General Education Classes
Retake tests/quizzes if "D" or lower, 2 wks. after grades are given out, can be read to ORALLY	4/14/2010 - 4/13/2011	Chapter Tests/Quizzes	General Education Classes
Assignments and tests may be shortened/modified & extended time to complete assignments & Tests (2x)	4/14/2010 - 4/13/2011	CW/HW/Ch. Tests	General Education Classes
Ability to use computer/alpha smart for written assignments	4/14/2010 - 4/13/2011	Assignments	Science/Social Science /English
Grades will be determined by Gen. Ed. and Special Ed. teachers	4/14/2010 - 4/13/2011	Grading Period	School campus
Copy of teacher NOTES/Overheads to supplement students own	4/14/2010 - 4/13/2011	Instructional Time	General Education Classes

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time <input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
---	--

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RESP'T APP 0304

ER 001324

Date: 4/14/2010

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-606
06/07
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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
PLACEMENT**

Student Name: EMILY C REED Grade: 07 DOB: [REDACTED] ID #: [REDACTED]
PLACEMENT: 8/30/2010 to 4/13/2011 Total minutes per week in school: 1855

PLACEMENT CONSIDERATIONS		PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT
Selected	Rejected	
<input checked="" type="checkbox"/>	<input type="checkbox"/> Regular class with supplementary aids and services (no removal)	<u>100</u> %
<input type="checkbox"/>	<input type="checkbox"/> Regular class and special education class (e.g. resource) combination	
<input type="checkbox"/>	<input type="checkbox"/> Self-contained program	
<input type="checkbox"/>	<input type="checkbox"/> Special School	
<input type="checkbox"/>	<input type="checkbox"/> Residential	
<input type="checkbox"/>	<input type="checkbox"/> Hospital	
<input type="checkbox"/>	<input type="checkbox"/> Home	
<input type="checkbox"/>	<input type="checkbox"/> Other: _____	

JUSTIFICATION FOR PLACEMENT INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS*

*Regular education environments include academic classes (which might include field trips linked to the curriculum), nonacademic settings (such as recess), and extra-curricular activities (for example, sports, after-school clubs, band, etc.).

IEP IMPLEMENTATION

- ☒ As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect.
- ☐ As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent.
- ☐ Parent not in attendance. ☐ Parent participated via telephone.
- ☒ A copy of this IEP was provided to the student's parent on: 4/15/2010 by: Kathleen Tatone TOR

(date) (name) (title)
Parent Signature: [Signature]

☐ Additional Form Needed

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RESP'T APP 0306

ER 001326

Date: 02/11/2011

Clark County School District
Las Vegas, Nevada

CCF-542
08/07

Student Support Services Division

STATEMENT OF ELIGIBILITY
ELIGIBILITY TEAM REPORT - SPECIFIC LEARNING DISABILITIES

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

GENERAL CRITERIA FOR SPECIFIC LEARNING DISABILITIES BASED ON ASSESSMENT OF
RESPONSE TO INTERVENTION AND/OR COMPARATIVE ANALYSIS:

- ☒ The pupil has been provided with learning experiences and instruction appropriate for the pupil's age.
- ☒ The pupil does not achieve adequately for the pupil's age or to meet State-approved grade-level standards in one or more of the following areas (check all that apply):
- | | |
|---|---|
| <input type="checkbox"/> Oral Expression | <input checked="" type="checkbox"/> Written Expression |
| <input checked="" type="checkbox"/> Listening Comprehension | <input type="checkbox"/> Basic Reading Skills |
| <input type="checkbox"/> Mathematical Calculation | <input type="checkbox"/> Reading Fluency Skills |
| <input type="checkbox"/> Mathematical Problem Solving | <input checked="" type="checkbox"/> Reading Comprehension |
- ☒ Any identified underachievement is not primarily the result of a visual, hearing or motor disability; mental retardation; emotional disturbance; cultural factors; environmental or economic disadvantage; or limited English proficiency.
- ☒ There is documented, data based evidence that any identified underachievement is not due to a lack of appropriate instruction in math or reading. This determination is based upon each of the following:
- ☒ Data that demonstrates that prior to, or as part of, the referral process, the pupil was provided appropriate instruction in regular education settings, delivered by qualified personnel; and
 - ☒ Data based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of the pupil's progress during instruction, and which was provided to the pupil's parents.
- ☒ The controlling factor for the pupil's eligibility is not lack of appropriate instruction in math.
- ☒ The controlling factor for the pupil's eligibility is not lack of appropriate instruction in reading, including the essential components of reading instruction. Explicit and systematic instruction has been provided for each of the following:
- ☒ Phonemic awareness
 - ☒ Phonics
 - ☒ Vocabulary development
 - ☒ Reading fluency, including oral reading skills
 - ☒ Reading comprehension strategies
- ☒ Interventions implemented in general education classrooms have not remedied any identified underachievement.
- ☒ The following relevant behavior was noted during the observation of the pupil:
- ☐ None noted.
- ☒ As follows: Emily demonstrates a noticeable response latency.
- ☒ Relationship of any relevant behavior to the academic functioning of the pupil:
- Such a response latency may impact oral participation in class.
- ☒ The following educationally relevant medical findings were noted:
- ☐ None noted.
- ☒ As follows: Historical hearing concerns.

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RESP'T APP 0307

ER 001327

Date: 02/11/2011

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCP-542
08/07

**STATEMENT OF ELIGIBILITY
ELIGIBILITY TEAM REPORT - SPECIFIC LEARNING DISABILITIES cont.**

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

- ☒ The determination that the pupil has a specific learning disability has been made based upon the results of the evaluation described in NAC 388.420. In interpreting the evaluation data, information was drawn from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the pupil's physical condition, social or cultural background, and adaptive behavior, and information from all of these sources was documented and carefully considered.

ADDITIONAL CRITERIA FOR ELIGIBILITY:

- ☒ Yes ☐ No Was Response to Intervention used?
☐ Yes ☐ No Was a comparative analysis used?

Additional Criteria for Response to Intervention:

- ☒ The pupil has not made sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified above (oral expression, listening comprehension, mathematical calculation, mathematical problem solving, written expression, basic reading skill, reading fluency skills, reading comprehension) when using a process based on the child's response to scientific, research-based intervention.

- ☒ The following instructional strategies were used:

Past special education service delivery: w/ audio system.

- ☒ The following student-centered data were collected:

Progress monitoring of goals and objectives of the IEP.

- ☒ Any identified underachievement is not correctable without special education services.

- ☒ On (date) 04/14/2010 the pupil's parents were notified about Nevada's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided; strategies for increasing the child's rate of learning; and the parents' right to request an evaluation.

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RESP'T APP 0308

ER 001328

Date: 02/11/2011

Clark County School District
Las Vegas, Nevada

CCF-542
08/07

Student Support Services Division

STATEMENT OF ELIGIBILITY
ELIGIBILITY TEAM REPORT - SPECIFIC LEARNING DISABILITIES

Student Name: EMILY C REED Grade: 08 DOB: ID #:

AND/OR

Additional Criteria for Comparative Analysis:

- ☐ The pupil exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments.
- ☐ The pupil exhibits a severe discrepancy between achievement and intellectual ability in one or more of the areas identified above (oral expression, listening comprehension, mathematical calculation, mathematical problem solving, written expression, basic reading skill, reading fluency skills, reading comprehension).
- ☐ The severe discrepancy had been determined through the use of a statistically valid formula which takes into account the age and level of ability of the pupil, the correlation between tests of ability and achievement, and the reliability of each test used. In the case of a pupil under the age of 6 years, a discrepancy may be identified through the use of one or more tests of language concepts or academic readiness skills.
- OR
- ☐ In considering the continuing existence of a severe discrepancy between achievement and intellectual ability in a reevaluation of the pupil, the determination of a severe discrepancy has been made based upon information other than the statistically valid formula.
- ☐ The severe discrepancy is not correctable without special education services.
- ☐ The severe discrepancy is corroborated by classroom-based assessment.

ADDITIONAL CRITERIA FOR ELIGIBILITY(Cont.):

Additional Information (Optional):

ELIGIBILITY DETERMINATION:

According to state regulations (NAC 388.420):

- ☐ This pupil is not eligible for special education under the category of specific learning disabilities, based on the above criteria.
- ☒ This pupil is eligible for special education under the category of specific learning disabilities, based on the above criteria.
- ☒ Primary Disability ☐ Secondary Disability

Eligibility Team Members:

Any member who disagrees with the eligibility determination must prepare a statement of the conclusions of that member.

		Agree	Disagree	
<u>Alyson Cerrone</u>	<u>Alyson Cerrone</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>04/07/2011</u>
Name	Regular Classroom Teacher			Date
<u>Julie Finkle</u>	<u>Julie Finkle</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>04/07/2011</u>
Name	Special Education Teacher			Date
<u>Scott Cook</u>	<u>Scott Cook</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>04/07/2011</u>
Name	School Psychologist			Date
<u>Alecia Kamedias</u>	<u>Alecia Kamedias</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>04/07/2011</u>
Name	Parent			Date
<u>J. REED</u>	<u>J. REED</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>4-7-11</u>
Name				Date
<u> </u>	<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>
Name				Date

- ☒ Any decision of an eligibility team must be justified in a written report. Parents have been provided a copy of the report and a copy of the determination of the pupil's eligibility. (NAC 388.340.4)

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RESP'T APP 0309

ER 001329

DATE: 4/7/2011

Clark-County School District

Las Vegas, Nevada

Student Support Services Division

CCF-530

08/07

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INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
INFORMATION

STUDENT/PARENT INFORMATION	
Student: <u>EMILY</u>	C <u>REED</u>
Sex: <u>F</u>	Birth Date: <u> </u> Grade: <u>08</u>
Student ID: <u> </u>	Student Primary Language: <u>ENGLISH</u> Student English Proficiency Code (optional): <u>EE</u>
Address: <u> </u>	
City/State/Zip: <u> </u>	Student Phone: <u> </u>
Parent/Guardian/Surrogate: <u>ALECIA</u>	KREMIDAS Parent Phone (Home): <u> </u>
Parent Phone (Work): <u> </u>	Email Address: <u> </u>
Optional (Cell): <u> </u>	Primary Language Spoken at Home: <u>ENGLISH</u>
Interpreter or Other Accommodations Needed: <u> </u>	
Emergency Contact/Phone Number: <u> </u>	
Current School: <u>ROGICH, SIG MS</u>	Zoned School: <u>ROGICH, SIG MS</u>
ELIGIBILITY CATEGORY	
Primary: <u>Hearing Impairment</u> <u>SLD</u>	Other: <u>Specific Learning Disability</u>
ELIGIBILITY DATE: <u>5/14/2008</u>	ANTICIPATED 3-YR REEVALUATION: <u>5/14/2011</u>
MEETING INFORMATION	
DATE OF MEETING: <u>4/7/2011</u>	DATE OF LAST IEP MEETING: <u>4/14/2010</u>
PURPOSE OF MEETING:	
<input type="checkbox"/> Interim IEP	<input checked="" type="checkbox"/> Annual IEP
<input type="checkbox"/> Initial IEP	<input type="checkbox"/> IEP Following 3-Yr Reevaluation
<input type="checkbox"/> IEP Revision without a meeting:	<input type="checkbox"/> Revision To IEP Dated: <u> </u>
At the request of: <input type="checkbox"/> Parent or <input type="checkbox"/> School District	<input type="checkbox"/> Exit/Graduation Reason: <u> </u>
<input type="checkbox"/> Other: <u> </u>	
IEP SERVICES WILL BEGIN: <u>4/8/2011</u>	ANTICIPATED DURATION OF SERVICES: <u>4/6/2012</u>
IEP REVIEW DATE: <u>4/6/2012</u>	COMMENTS: <u> </u>
IEP PARTICIPATION	
Parent/Guardian/Surrogate*	<u>A. Kremidas</u> <u>Alecia Kremidas</u>
Student**	<u>E. Reed</u> <u>NOT IN ATTENDANCE</u>
LEA Rep.*	<u>J. Cerruti</u> <u>J. Cerruti</u>
Spec. Ed Teacher***	<u>J. Finke</u> <u>J. Finke</u>
Reg. Ed Teacher***	<u>A. Cerrone</u> <u>A. Cerrone</u>
School Psychologist	<u>S. Cook</u> <u>S. Cook</u>
* Required participant;	
** Student must be invited when transition is discussed (beginning at age 14 or younger if appropriate).	
*** The IEP team must include at least one regular education teacher of the student (if the student is, or may be, participating in the regular education environment).	
PROCEDURAL SAFEGUARDS	
<input checked="" type="checkbox"/> I have received a statement of procedural safeguards under the Individuals With Disabilities Education Act (IDEA) and these rights have been explained to me in my primary language.	
<input checked="" type="checkbox"/> I received the Middle/High School Graduate profile.	
<input type="checkbox"/> N/A prior to 14 years of age	
Parent/Guardian Signature: <u> </u>	
AT LEAST ONE YEAR PRIOR TO REACHING AGE 18, STUDENTS MUST BE INFORMED OF THEIR RIGHTS UNDER IDEA AND ADVISED THAT THESE RIGHTS WILL TRANSFER TO THEM AT AGE 18.	
<input checked="" type="checkbox"/> Not applicable. Student will not be 18 within one year, and the student's next annual IEP meeting will occur no later than the student's 17th birthday.	
<input type="checkbox"/> The student has been informed of his/her rights under IDEA and advised of the transfer of these rights at age 18.	

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RESP'T APP 0310

ER 001330

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Las Vegas, Nevada
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CCF-600

07/05

Page 2 of 15**PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE**Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
Wechsler Individual Achievement Test - Second Edition	<p>Receptive Vocabulary - 78 Oral Discourse Comprehension - 71 Listening Comprehension - 70</p> <p>Errors were made in recalling stated detail, and stated cause and effect, and could reflect difficulties in auditory memory and processing.</p> <p>Word Reading - 92 Pseudoword Decoding - 92 Reading Comprehension - 83 Basic Reading - 91</p> <p>In reading decoding, average range skills were noted. In word reading, errors were made in vowel sounds ('posed' became 'paused'), incorrect accenting, vowel blends ('choir' became 'chore'), on word endings, and difficulty with long, unfamiliar words. In phonetic decoding, errors were made in vowel blends ('dreep' became 'drep'), vowel sounds ('taph' became 'tafe'), adding unnecessary sounds, and in recognition of silent letters. Reading comprehension was in the Below Average range. Errors were made in recognizing stated detail, making inferences, drawing conclusions, and appeared at times related to difficulties in word knowledge.</p> <p>Numerical Operations - 106 Math Problem Solving -</p> <p>In math calculations, Emily was successful on problems of addition (including 'carrying'), subtraction (including 'regrouping'), single and multi-digit multiplication, simple and long division, reducing fractions, and several problems of simple algebra. Errors were made in knowing the value of pi, in solving for multiple variables, in working with percentages, and on problems of geometry. In math problem solving, errors were made in work involving probability, in telling time duration from a calendar, in determining perimeter, in determining numerical average, on problems involving spatial reasoning, and on longer word problems involving multiple steps.</p>	<p>Listening difficulties may impact Emily's consistent ability to comprehend oral instruction. Accommodations to address such difficulty would appear appropriate.</p> <p>Reading comprehension difficulties, in recognizing stated detail, drawing conclusions, and making inferences, may inspire inconsistency in Emily's comprehension of grade level text. Interventions geared toward enhancing reading comprehension skills appears warranted.</p>

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RESP'T APP 0311**ER 001331**

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PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 08 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
WIAT-II (cont)	Spelling - 80 Errors were made in the use of silent letters, in consonant blends, in vowel blends, and in the form of omissions.	Spelling difficulties may impact the comprehensibility of Emily's written work. Accommodations geared toward facilitating her correct spelling may be helpful.
Teacher Observations	<p>WORLD GEOGRAPHY: Emily is a very quiet student who keeps to herself. She is always on time, prepared, on task, and always completes her work. Emily's strength is her work ethic. She understands the material, is organized, and always completes her work. An observed weakness is that she does not like to participate or speak in front of others. Suggested accommodations include the FM system and preferential seating.</p> <p>MATH: Emily is a hard working, quiet, and polite student. She comes to class on time, prepared, and ready to work. Emily does not participate in class and has difficulties expressing when she does not understand something. Increasing her self-advocacy skills by asking for assistance on items of uncertainty would assist Emily tremendously. Suggested accommodations include the FM system, preferential seating, and extended time on tests/quizzes.</p>	<p>This one-year course is the study of the world's cultures, economics, history, regions, and geographic features from the development of ancient civilizations through the Age of Exploration. Students examine the earth from the scale of states, nations, countries, and continents creating connections to contemporary geographic conditions. Students synthesize concepts, patterns, and interdependent relationships that make our ever-changing world diverse and dynamic. Instructional practices incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to society. The appropriate use of technology is an integral part of this course. This is a required course for all eighth grade students.</p> <p>This one-year course is designed to provide students with the necessary knowledge and skills to successfully complete algebra and geometry. This course builds on the concepts of number operations with integers, decimals, and rational numbers, word problems and reasoning skills, data analysis, probability, geometry, measurement, spatial sense, patterns, and beginning algebra. Instructional practices incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to society.</p>

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RESP'T APP 0312

ER 001332

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Las Vegas, Nevada
Student Support Services Division

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07/05
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PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
Teacher Observations continued	<p>MATH continued</p> <p>SCIENCE: Emily is an excellent student. She works well with groups and independently. Emily is always prepared and completes her work in a timely manner. Her academic strengths are motivation, work completion, and great attendance. Test/quizzes are her weakness. Suggested accommodations include test/quiz strategies.</p> <p>ENGLISH: Emily is a very respectful young woman and an extremely hard worker. She is always positive and focused. Emily self-advocates well, and is very conscientious with her school work. She takes pride in what she does, and her work reflects that. The only concern is her writing skills. Sometimes her sentence structure is awkward, making her ideas hard to follow. Suggested accommodations include preferential seating and the opportunity to re-do difficult assignments for a higher grade.</p>	<p>The use of technology, including calculators and computer software, is an integral part of this course. This course fulfills the mathematics requirement for eighth-grade students.</p> <p>This year-long course for eighth-grade students provides the physical science explanations that extend understandings developed in previous science courses. Students will use scientific processes, protocols, and tools, including inquiry, to build understanding of structures, patterns, and relationships explained through the physical sciences. Critical thinking, collaboration, accuracy, and communication skills will be emphasized as students refine their scientific literacy. This course is required for eighth-grade students. Instructional practices will incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to our society. The appropriate use of technology is an integral part of this course.</p> <p>This one-year course will emphasize developing and strengthening students' writing, reading, listening, speaking and critical thinking skills. Instructional practices will incorporate integration of diversity awareness including appreciation of all cultures and their important contributions to society. The appropriate use of technology is an integral part of this course. This course fulfills the English requirements for eighth-grade students.</p>

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RESP'T APP 0313

ER 001333

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07/03

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Student Support Services Division

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Student Name: EMILY C REED Grade: 08 DOB: ID #:

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: Academic Achievement, Language/Communication Skills, Social/Emotional/Behavior Skills, Cognitive Abilities, Health, Motor Skills, Adaptive Skills, Pre-Vocational Skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to Training/Education, Employment, and Independent Living Skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
CCSD Audiology Department	In September 2010, Emily was re-evaluated for hearing impairment. At that time, they determined Emily not eligible for services under Hearing Impairment any longer.	When a re-evaluation is completed every three years, it is determined if the student still qualifies for services.
Parent Observation	Emily's parents have taken Emily for multiple opinions. The most recent evaluation was conducted at SoundPoint Audiology and Hearing. Lisa M. Kurak, Doctor of Audiology, found that Emily had a moderate hearing loss.	

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RESP'T APP 0314

ER 001334

Date: 4/7/2011

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Student Support Services Division

CCF-612
08/07

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**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
STRENGTHS, CONCERNS, INTERESTS AND PREFERENCES**

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

STATEMENT OF STUDENT STRENGTHS

Emily is a very polite student with a hard work ethic. She never gives less than her best!

STATEMENT OF PARENT EDUCATIONAL CONCERNS

Emily's parents are concerned about Emily's needs being met in high school.

STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS

(required if transition services will be discussed, beginning at age 14 or younger if appropriate)

If student was not in attendance, describe the steps taken to ensure that the student's preferences and interests were considered:

In her free time, Emily likes to bake and spend time with her friends. Upon graduation from high school, Emily would like to go to college and become a nutritionist.

CONSIDERATION OF SPECIAL FACTORS

- | | |
|--|---|
| 1. Does the student's behavior impede the student's learning or the learning of others?
If YES, team must provide positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 2. Does the student have limited English proficiency?
If YES, team must consider language needs of the student as those needs relate to the student's IEP. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 3. Is the student blind or visually impaired?
If YES, team must evaluate reading and writing needs and provide for instruction in Braille unless determined not appropriate for the student. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 4. Is the student deaf or hard of hearing?
If YES, team must consider communication needs. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |
| 5. Does the student require assistive technology devices and services?
If YES, team must determine nature and extent of devices and services. | <input checked="" type="checkbox"/> No action needed. <input type="checkbox"/> Yes, addressed in IEP. |

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RESP'T APP 0315

ER 001335

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INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
TRANSITION

Student Name: EMILY C REED Grade: 08 DOB: ID #:

DIPLOMA OPTION SELECTED FOR GRADUATION (Diploma option must be declared at age 14 and reviewed annually.)	
<input checked="" type="checkbox"/> Standard or Advanced High School Diploma. Must complete all applicable credit requirements and pass the High School Proficiency Examination (with permissible accommodations as needed).	<input type="checkbox"/> Adjusted High School Diploma. Must complete IEP requirements.

STUDENT'S VISION FOR THE FUTURE A short statement that directly quotes what the student wants for the future.

Upon graduation from high school, Emily would like to go to college and become a nutritionist.

STATEMENT OF TRANSITION SERVICES: COURSE OF STUDY

Beginning at age 14 or younger if determined appropriate by the IEP team, describe the focus of the student's course of study.

Continuing with the general education course of study.

STATEMENT OF MEASURABLE POSTSECONDARY GOALS

Beginning not later than the first IEP to be in effect when the student is 16, describe measurable postsecondary goals in the following areas:

<input type="checkbox"/> Training/Education	
<input type="checkbox"/> Employment	
<input type="checkbox"/> Independent Living Skills (As Appropriate)	
<input type="checkbox"/> Other:	

STATEMENT OF TRANSITION SERVICES: COORDINATED ACTIVITIES

Beginning not later than the first IEP to be in effect when the student is 16, develop a statement of needed transition services, including strategies or activities, for the student.

Instruction:
Any Other Agency Involvement (Optional):
Related Services:
Any Other Agency Involvement (Optional):
Community Experiences:
Any Other Agency Involvement (Optional):
Employment and Other Post-School Adult Living Objectives:
Any Other Agency Involvement (Optional):
Acquisition of Daily Living Skills and Functional Vocational Evaluation (if Appropriate):
Any Other Agency Involvement (Optional):
Other:
Any Other Agency Involvement (Optional):

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RESP'T APP 0316

ER 001336

Date: 4/7/2011

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCP-S&T
08/07Page 8 of 15

**IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR
SHORT-TERM OBJECTIVES**

Student Name: EMILY C REED Grade: 8 DOB: [REDACTED] ID #: [REDACTED]

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will read aloud with fluency, accuracy, appropriate intonation, and expression achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests, as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will decode regular multi-syllable words achieving a criteria of 6 out of 10 times as implemented by Special Education and General Education Teacher.
# 2	By end of first quarter of 2011-2012 school year, in a classroom setting, EMILY will read the passage at a fluent rate achieving a criteria of 7 out of 10 times as implemented by Special Education and General Education Teacher.
# 3	By end of first semester of 2011-2012 school year, in a classroom setting, EMILY will use knowledge of complex word families to decode unfamiliar words when reading achieving a criteria of 8 out of 10 times as implemented by Special Education and General Education Staff.
# 4	By annual review date, in a classroom setting, EMILY will read aloud with fluency, accuracy, appropriate intonation, and expression achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests, as implemented by Special Education and General Education Staff.

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)	
By annual review date, in a classroom setting, EMILY will revise drafts, using an established rubric to improve the coherence and logical progression of ideas achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff	
<input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)	
BENCHMARK OR SHORT-TERM OBJECTIVE	
# 1	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will proofread 5 sentences for errors in grammar, capitalization, and punctuation achieving a criteria of 6 out of 10 times as implemented by Special Education and General Education Staff
# 2	By end of first quarter of 2011-2012 school year, in a classroom setting, EMILY will revise writing to improve organization achieving a criteria of 7 out of 10 times as implemented by Special Education and General Education Teacher
# 3	By end of first semester of 2011-2012 school year, in a classroom setting, EMILY will revise writing to improve organization and word choice after checking the logic of the ideas and precision of the vocabulary achieving a criteria of 8 out of 10 times as implemented by Special Education and General Education Teacher
# 4	By annual review date, in a classroom setting, EMILY will revise drafts, using an established rubric to improve the coherence and logical progression of ideas achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff.

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RESP'T APP 0317

ER 001337

Date: 4/7/2011

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Student Support Services Division

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**IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR
SHORT-TERM OBJECTIVES**

Student Name: EMILY C REED Grade: 8 DOB: ID #: **MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)**

By annual review date, in a classroom setting, EMILY will identify and compare main ideas and important concepts of texts achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff

☐ Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

☐ Training/Education ☐ Employment ☐ Independent Living Skills ☐ Other _____

☐ Check here if this goal will be addressed during Extended Year Services (ESY)
BENCHMARK OR SHORT-TERM OBJECTIVE

# 1	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will paraphrase the ideas achieving a criteria of 6 out of 10 times as implemented by Special Education and General Education Teacher By annual review date, in a classroom setting,
# 2	By end of first quarter of 2011-2012 school year, in a classroom setting, EMILY will identify the main idea of the text and will identify statements within that text which support that main idea achieving a criteria of 7 out of 10 times as implemented by Special Education and General Education Teacher
# 3	By end of first semester of 2011-2012 school year, in a classroom setting, EMILY will discern main ideas and concepts presented in text, identifying and assessing evidence that supports those ideas achieving a criteria of 70% as implemented by Special Education and General Education Teacher
#	By annual review date, in a classroom setting, EMILY will identify and compare main ideas and important concepts of texts achieving a criteria of 80% as measured by observation, documentation, teacher-made and standardized tests as implemented by Special Education and General Education Staff

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)

By annual review date, in a classroom setting, EMILY will increase self-advocacy skills by asking questions about items that are unclear and obtaining assistance for these items. achieving a criteria of 80% as measured by observation, documentation and work samples as implemented by Special Education and General Education Teacher.

☐ Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:

☐ Training/Education ☐ Employment ☐ Independent Living Skills ☐ Other _____

☐ Check here if this goal will be addressed during Extended School Year Services (ESY)
BENCHMARK OR SHORT-TERM OBJECTIVE

# 1	By end of second semester of 2010-2011 school year, in a classroom setting, EMILY will raise her hand to ask a question about an item of uncertainty achieving a criteria of 6 out of 10 times as implemented by Special Education and General Education Teacher.
# 2	By end of first quarter of 2011-2012 school year, in a classroom setting, EMILY will ask an adult to repeat/re-phrase the item of uncertainty achieving a criteria of 7 out of 10 times as implemented by Special Education and General Education Teacher.
# 3	By end of first semester of 2011-2012 school year, in a classroom setting, EMILY will arrange a time to obtain individual assistance achieving a criteria of 8 out of 10 times as implemented by Special Education and General Education Teacher.
#	

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RESP'T APP 0318**ER 001338**

ER 001340

Date: 4/7/2011

Clark County School District

Las Vegas, Nevada

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Student Support Services Division

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP) ACCOMMODATIONS AND MODIFICATIONS

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]

SUPPLEMENTARY AIDS AND SERVICES

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Extended time to complete tests/quizzes (60 minutes extra)	4/8/2011 - 4/6/2012	Tests, quizzes, and SEM EXAM	All classes
Read/repeat directions to check for understanding.	4/8/2011 - 4/6/2012	Instructional Time	All classes
Retake tests/quizzes if "D" or lower, 2 wks. after grades are given out, can be read to ORALLY	4/8/2011 - 4/6/2012	Chapter Tests/Quizzes	All classes
Chunk longer assignments into 1-2 steps at a time to assist with comprehension	4/8/2011 - 4/6/2012	Homework and class work	All classes
Preferred seating near the source of instruction and away from distraction	4/8/2011 - 4/6/2012	Direct instruction	All classes
FM system will be provided and maintained by CCSD	4/8/2011 - 4/6/2012	During instruction	School campus
Close captioning, visual aids, & charts to supplement instruction	4/8/2011 - 4/6/2012	During instruction	All classes

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time <input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
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RESP'T APP 0321

ER 001341

Date: 4/7/2011

Clark County School District
Las Vegas, Nevada
Student Support Services Division

CCF-537.1
08/07Page 13 of 15

**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
ACCOMMODATIONS AND MODIFICATIONS**

Student Name: EMILY C REED Grade: 08 DOB: [REDACTED] ID #: [REDACTED]**SUPPLEMENTARY AIDS AND SERVICES**

Includes aids, services, and other supports provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable students with disabilities to be educated with non-disabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Describe Below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Extended time on larger assignments (up to 2 days)	4/8/2011 - 4/6/2012	Longer assignments	All classes
Grades to be determined by both the General Education and Special Education teacher	4/8/2011 - 4/6/2012	Each grading period	All classes
	-		
	-		
	-		
	-		
	-		

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district-wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Norm-Referenced Tests (NRT) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
State Criterion-Referenced Tests (CRT) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
High School Proficiency Exam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Proficiency Examination in Writing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
NASAA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List accommodation(s):

ACTIVITIES ELIGIBILITY

<input type="checkbox"/> Not Necessary at this time <input type="checkbox"/> Regulations exception(s) necessary (Noted in accommodations, must contact NIAA)	<input checked="" type="checkbox"/> The student will meet all CCSD and NIAA Regulations.
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RESP'T APP 0322**ER 001342**

Date: 4/7/2011

Clark County School District

Las Vegas, Nevada

Student Support Services Division

CCF-606

08:07

Page ____ of ____

**INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)
PLACEMENT**

Student Name: EMILY C REED Grade: 08 DOB: ID #:

PLACEMENT: 6/10/2011 to 4/6/2012

Total minutes per week in school: 1855

PLACEMENT CONSIDERATIONS		PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT
Selected <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Rejected <input checked="" type="checkbox"/> Regular class with supplementary aids and services (no removal) <input type="checkbox"/> Regular class and special education class (e.g. resource) combination <input type="checkbox"/> Self-contained program <input type="checkbox"/> Special School <input type="checkbox"/> Residential <input type="checkbox"/> Hospital <input type="checkbox"/> Home <input type="checkbox"/> Other: _____	83 %
JUSTIFICATION FOR PLACEMENT INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS* <p>Emily requires special instruction in the area(s) of reading comprehension, written expression, and study/organizational skills. Guidance class is offered to incoming high school freshman to assist them in the transition from middle to high school. Emily has an inability to learn through independent practice in the general education setting because she requires significant adjustment to the content and/or delivery of the curriculum in order to access and progress in the general education curriculum. Emily is unable to benefit from direct instruction in the general education setting and has learning disabilities that require multiple opportunities to practice and re-teach, individualized instructional method and materials, continual assistance, prompts, modeling, and verbal cues. These supports are necessary to ensure Emily's success in both the general education and special education setting. Emily's needs are best met when provided additional support. Potential harmful effects of this placement could include the lack of exposure to general education curriculum and/or the lack of interaction with non-disabled peers.</p>		
<p>*Regular education environments include academic classes (which might include field trips linked to the curriculum), nonacademic settings (such as recess), and extra-curricular activities (for example, sports, after-school clubs, band, etc.).</p>		
IEP IMPLEMENTATION <input checked="" type="checkbox"/> As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect. <input type="checkbox"/> As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent. <input type="checkbox"/> Parent not in attendance. <input type="checkbox"/> Parent participated via telephone. <input type="checkbox"/> A copy of this IEP was provided to the student's parent on: _____ by: <u>Debra Kravitz</u> <div style="text-align: center;"> (date) (name) (title) </div> Parent Signature: _____		

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RESP'T APP 0324

ER 001344

Clark County School District
Student Support Services Division
Las Vegas, Nevada 89121
FAX (702) 799-2494
Multidisciplinary Evaluation Team Report

CONFIDENTIAL

This report contains confidential information and is the property of Clark County School District,
Las Vegas, Nevad.

Name: Reed, Emily
Student ID: [REDACTED]
MDT Date: 4/7/2011
Reevaluation Date: 4/7/2014
Date Of Birth: [REDACTED]
Chronological Age: 14 - 2
Gender: Female
Ethnicity: White
Grade: 08
Parents: Alecia Kremidas and Jeffrey Reed (Parents (living separately))
Address: [REDACTED]
Home Phone: [REDACTED]
PLC: English
PLH: English
Home School: Rogich M. S.
Attending School: Rogich M. S.

REASON FOR REFERRAL:

Emily was referred for reevaluation on 01/25/11 by Scott Cook, her School Psychologist as required by the Individual with Disabilities Education Act.

Scope of Evaluation:

As part of this evaluation, the combined members of the student's IEP Team and Eligibility Team, including an LEA representative, a general education teacher, and a special education teacher, had the opportunity to review existing evaluation data and on the basis of that review, along with input from the parent, identify what additional data if any were needed to complete the reevaluation. The information available for review included her last comprehensive evaluation conducted 05/14/08.

In a student interview, Emily indicated that what she likes best about school is learning new things. She reported that she does not like when she gets a lot of homework. Emily stated that she likes her teachers, who are helpful, and thought that she was doing better at school than before. Reading comprehension was noted to occasionally be difficult, depending upon the book, and that writing mechanics was not easy. Math was described as "in the middle" regarding being easy or difficult, and Emily was noted to have fair automatic recall of math facts. Emily indicated that she may have difficulty understanding teachers when they present a lesson, depending upon teacher and subject. She reported that she generally gets her class work and homework done, and likes most of her classmates. Emily was noted to have a rather substantial response latency in responding to most orally posed questions.

In a parent interview, Emily's mother indicated that she thought that Emily had improved greatly since Emily had begun at Rogich MS. Such areas as vocabulary and reading skills were perceived as much better, and Emily has appeared more confident. However, Ms. Kremidas questioned the recent CCSD audiologist's assessment results, and is pursuing additional assessment in the community. Discussion of current assessment results took place, with discussion about auditory processing difficulties, hearing based and otherwise. Ms. Kremidas appreciated the

RESP'T APP 0325

ER 001345

Reed, Emily - Multidisciplinary Evaluation Team Report

accommodations that Emily has been receiving in CC classes, in being able to re-take tests, and particularly, the use of a portable amplifier. Emily has been more confident and better at understanding lessons in the classroom, but she is yet noted to be slow to process oral information. Ms. Kremidas indicated that she is comfortable maintaining the current Learning Disabled eligibility, but also wishes to clarify formal audiological and hearing assessment.

In a teacher progress report, Emily's World Geography teacher indicated that Emily was making satisfactory progress and earning a grade of 'A'. Emily was described as very hard working and as completing all her assignments on time. She is very quiet and well behaved, and will raise her hand to ask questions and give answers from time to time. In Science, Emily was reported to be making satisfactory progress and earning a grade of 'A'. She was described as positive, motivated and dedicated, and as having good interactions with teacher and peers. Emily was perceived as potentially benefiting from getting more time taking notes and taking tests. In Pre-Algebra, Emily was indicated to be making satisfactory progress and earning a grade of 'B'. No behavioral difficulties were noted, and Emily was described as a hard-working student. She was reported to always give 100 percent in all that she does. Emily's English teacher reported that Emily is making satisfactory progress and earning a grade of 'A'. Emily was described as an outstanding student, and as self-motivated and having pride in her work. At times, Emily makes simple grammatical errors, but work effort and completion are appropriate.

The multidisciplinary team believes Emily continues to require special education and her IEP does not need to be revised. The measurable annual goals on the present IEP continue to be appropriate. She will continue to participate in the general curriculum as indicated in the IEP. No additional information is necessary.

EVALUATION PROCEDURES:

The assessment included all the components of a comprehensive evaluation required by state regulations, including information provided by Emily's parents or primary caregiver (if the student is younger than 18 years of age). Information regarding Emily's current classroom performance (observations and assessments), and the observations of her teachers and other providers of instructional or educational services were also included. Emily's primary language, racial, and ethnic background were considered prior to selection and interpretation of evaluation procedures and measures. All assessment procedures measure a limited sample of a person's total repertoire. The selected measures should only be interpreted within the limits of their measured validity.

The following procedures were components of the evaluation:

PROCEDURES	DATE
Vision Screening, Hearing Screening	4/4/2011
Review of Previous Assessment and School Records	1/26/2011
Student Interview	2/15/2011
Parent Interview	3/1/2011
Wechsler Individual Achievement Test - Third Edition	2/15/2011
Levels of Evidence Protocol	2/15/2011
LD Hypothesis Testing Protocol	2/15/2011
Intervention Assessment Protocol	2/15/2011
Extrinsic and Exclusionary Factors Protocol:	2/15/2011

BACKGROUND INFORMATION:

A review of records was conducted by Scott Cook, School Psychologist.

DEVELOPMENTAL HISTORY:

According to her mother, Emily's prenatal history is educationally unremarkable. Emily's birth history was without complication and appears educationally unremarkable. Also, according to her mother, Emily's neonatal history was without major incident. Following birth, Emily was able to go home at the same time as her mother.

There is nothing noted in the developmental assessment which appears to adversely impact Emily's educational performance.

MEDICAL HISTORY:

EYE	NEAR	DISTANT
-----	------	---------

Reed, Emily - Multidisciplinary Evaluation Team Report

Left	20/25	20/25
Right	20/25	20/25
Both	20/25	20/25

Emily's general health could be described as good. Emily does not have any history of any prior medications or current medications that might impact her academic performance or behavior. She does take medications for environmental allergies.

On 03/02/11 Emily's vision and hearing were screened. Her vision and hearing were within normal limits suggesting that she has adequate vision and hearing for academic functioning. Emily is noted to have been assessed to have a bilateral mild, fairly flat sensori-neural hearing loss, which is slightly worse in the right ear.

Emily was noted to have had a recent audiology examination that indicated normal hearing, and regarding which she was exited from special education services as having a hearing loss. The nurse noted that Emily was quiet, cooperative and followed directions. She has a delayed response with each task. She keeps an FM system in the Health office and comes daily to pick up and return for use in class. The nurse suggested that student's health does not interfere with learning at this time.

ATTEMPTS TO EDUCATE IN THE REGULAR CLASSROOM:

Interventions previously attempted in an effort to maintain Emily in the regular program include: given modified or shortened assignments, given high interest/low vocabulary materials, given individualized classroom help, contact between parent and school, given additional time and given one-on-one with the teacher. Explicit and systematic instruction was provided in reading. The five essential components were taught as needed (phonemic awareness, phonics, vocabulary, reading fluency, and reading comprehension). Explicit and systematic instruction was provided in writing. The essential components were taught as needed (handwriting, capitalization, punctuation, spelling, sentence structure, etc.). Explicit and systematic instruction was provided in math. The essential components were taught as needed (math operations, math reasoning, functional math like time, money, etc.). The instruction was provided by "qualified" teachers in general education settings. The instruction was designed to match the skill level of the student.

ANALYSIS OF INTERVENTION RESPONSE:

According to NAC 388.325, a dual deficit in both Level of Performance and Rate of Learning must be evident in order for response to intervention to be determined inadequate.

EDUCATIONAL HISTORY:

Emily is presently receiving special education services. She has previously been eligible for such services as a Hearing Impaired student (primary eligibility) and learning disabled student (secondary). However, recent assessment suggests that she shall no longer be eligible for her Hearing Impaired eligibility. That noted, current assessment shall consider for re-evaluation, her other eligibility as a student with a learning disability.

PRIOR EVALUATIONS:

Emily was previously evaluated on 05/14/30 while in CCSD. Her chronological age at that time was 11-6.

Test of nonverbal Intelligence - Third Edition

On two separate administrations of forms of this test, Emily's scores ranged from SS=65 (first administration) to SS95 (second form, administered on 5/8/08).

Reynolds Intellectual Assessment Scales

Verbal Intelligence Index - 85

Nonverbal Intelligence Index - 97

Composite Intelligence Index - 89

Composite Memory -47

Woodcock Johnson III Tests of Achievement

Letter Word Identification - 72

Reading Fluency - 58

Reed, Emily - Multidisciplinary Evaluation Team Report

Reading Comprehension - 62
Oral Expression - 42
Listening Comprehension - 42
Math Calculation - 89
Math Fluency - 75
Math Reasoning - 99
Spelling - 70
Writing Fluency - 92
Written Expression - 82

Conners Parent Rating Scale - Revised: Long Form
Clinically Significant - Cognitive Problems/inattention
At-Risk Concern - DSM-IV: Inattentive

Conners Teacher Rating Scale - Revised: Long Form
At-Risk - Cognitive Problems/Inattention

At that time the primary disability was Hearing Impairment, and the secondary eligibility was Specific Learning Disability; the least restrictive environment recommended was Regular w/ Resource.

ACADEMIC ACHIEVEMENT ASSESSMENTS:

Wechsler Individual Achievement Test - Third Edition -- Results:

Subtest	RS	SS	%ile
Receptive Vocabulary	10	78	7
Oral Discourse Comprehension	10	71	3
LISTENING COMPREHENSION	-	70	2
READING COMPREHENSION	21	83	13
WORD READING	52	92	30
PSEUDO WORD DECODING	29	92	30
NUMERICAL OPERATIONS	41	106	58
SPELLING	24	80	9
BASIC READING	184	91	27

The Wechsler Individual Achievement Test-Third Edition (WIAT-III) is an individually administered clinical instrument designed to measure the achievement of students who are in grades pre-kindergarten (PK) to 12, or ages 4 years 0 months through 19 years 11 months. The WIAT-III consists of 16 subtests used to evaluate listening, speaking, reading, writing, and mathematics skills.

Listening Comprehension was in the Below Average range (SS=70). This test is made up of the Receptive Vocabulary subtest (SS=78; Below Average) and Oral Discourse Comprehension (SS=71; Below Average). Errors were made in recalling stated detail, and stated cause and effect, and could reflect difficulties in auditory memory and processing.

In reading decoding (SS=92) and phonetic decoding (SS=92), average range skills were noted. In word reading, errors were made in vowel sounds ('posed' became 'paused'), incorrect accenting, vowel blends ('choir' became 'chore'), on word endings, and difficulty with long, unfamiliar words. In phonetic decoding, errors were made in vowel blends ('dreep' became 'drep'), vowel sounds ('taph' became 'tafe'), adding unnecessary sounds, and in recognition of silent letters. Reading comprehension was in the Below Average range (SS=83). Errors were made in recognizing stated detail, making inferences, drawing conclusions, and appeared at times related to difficulties in word knowledge.

In math calculations (SS=106), Emily was successful on problems of addition (including 'carrying'), subtraction (including 'regrouping'), single and multi-digit multiplication, simple and long division, reducing fractions, and several problems of simple algebra. Errors were made in knowing the value of pi, in solving for multiple variables, in working with percentages, and on problems of geometry. In math problem solving, errors were made in work involving 'probability', in telling time duration from a calendar, in determining 'perimeter', in determining numerical average, on problems involving spatial reasoning, and on longer word problems involving multiple steps.

Spelling was in the Below Average range (SS=80). Errors were made in the use of silent letters, in consonant blends, in vowel blends, and in the form of omissions.

ALTERNATIVE ASSESSMENTS:

Extrinsic and Exclusionary Factors Protocol: -- Results:

This assessment protocol provides evidence that is required for the determination of special education eligibility as SLD. Specifically, this protocol is designed to assess and document whether extrinsic and/or exclusionary factors are primarily responsible for a student's underachievement.

According to State and Federal regulation, when underachievement is primarily the result of a visual, hearing, or motor disability; mental retardation; emotional disturbance; cultural factors; environmental or economic disadvantage; limited English proficiency; or lack of appropriate instruction in reading and math, SLD cannot be determined. Collectively, these factors are called exclusionary factors, because if one or a combination of these factors is or are primarily responsible for a student's underachievement, then by law these factors exclude that student from being identified as SLD. By definition primarily means an impact on achievement of greater than 50%.

Based on the weight of the evidence, this assessment protocol indicates that more likely than not an Extrinsic/Exclusionary Factor or a combination of these factors does/do not have an adverse impact on Emily's learning. Therefore, this factor or these factors is/are not considered to be primarily responsible for Emily's underachievement.

It is noted that Emily has some historical limitations in hearing, but these were not found sufficient to warrant the maintaining of her Hearing Impaired eligibility.

Intervention Assessment Protocol -- Results:

This assessment protocol indicates that valid intervention response data are evident. Specifically, IEP intervention was research based, and it was implemented with integrity (see protocol dated 2/15/2011 for additional information).

Levels of Evidence Protocol -- Results:

This assessment protocol indicates that Emily continues to require or need special education services in order to meet either age or grade level standards of performance (see protocol dated 2/15/2011 for additional information).

LD Hypothesis Testing Protocol -- Results:

This assessment protocol indicates that SLD continues to be the best explanation for a Emily's underachievement (see protocol dated 2/15/2011 for additional information).

SPECIAL EDUCATION DETERMINATION:

Based upon the information obtained during the course of this evaluation, no educational, environmental, economic disadvantage or cultural, ethnic difference is considered to be the primary factor influencing Emily's educational difficulties.

MDT Summary of Evidence Protocol: The comprehensive evaluation described in this report formally examined whether this student meets the two general qualifying conditions required for special education eligibility: 1) the identification of an IDEA disability, and 2) the determination of a need for special education services. The MDT Summary of Evidence Protocol is used to summarize and document the eligibility MDT's conclusions regarding assessment findings related to these two qualifying conditions.

Regarding the condition of disability, this evaluation found that Emily's underachievement in listening comprehension, reading comprehension, spelling is significantly low and not primarily the result of mental retardation, emotional disturbance, other disabilities or exclusionary factors. In addition, this evaluation found that Emily's educational performance is indicative of unexpected and unexplainable underachievement, which is the Clark County School District's operational definition of a Specific Learning Disability. Therefore, SLD is believed to be the best and most probable explanation for Emily's underachievement among reasonable alternative explanations.

Regarding the condition of need, this evaluation found that Emily was provided appropriate instruction, which included individualized intervention, in general education settings. Unfortunately, Emily's response was inadequate as indicated by dual deficits in both Level of Performance and Rate of Learning. Consequently, Emily requires specially designed instruction that cannot be provided or sustained in a general education setting in order to meet age or grade level standards.

Since all required criteria according to State and Federal regulation have been comprehensively evaluated and the two eligibility conditions of disability (SLD) and need are clearly and convincingly evident as documented on the MDT Summary of Evidence Protocol, it is the conclusion of this Multidisciplinary Team that Emily is eligible for special education under the category of Specific Learning Disability pursuant to State of Nevada regulation (NAC 388.420).

Instructional Recommendations:

Regardless of actual placement, areas which may require specific goals are reading comprehension, spelling skills, and listening comprehension.

RECOMMENDATIONS:

1. Emily appears to be eligible for special education in the area of specific learning disability. However, final determination of eligibility shall be made by the site based multidisciplinary team.
2. Consultation with the school psychologist should be made available on an as needed basis to Emily's caregivers.
3. Continue to facilitate Emily's leisure reading of books and magazines of topical interest, to assist her further development of reading decoding skills, comprehension, fluency, and exposure to new vocabulary.
4. Before beginning instruction, make sure Emily is attending (ex. making eye contact, call Emily by name prior to delivering the information, etc.). Ask Emily to paraphrase new and important instruction to verify her understanding.
5. Enable Emily to use a spell check device or spelling dictionary to double check the correctness of words of which she is not sure.
6. Support and praise Emily's effort in the classroom. Encourage Emily to give her best effort, whether such effort results in good grades or not.
7. Repeat and regularly review important information that is presented orally. Consider maintaining Emily's use of an amplifying device, as Emily reports benefitting from it and understanding classroom information in the classroom through its usage.

The evaluation team that determined eligibility included participation by the parent and, when applicable, the student. The parent attended the eligibility determination meeting.

This report includes a description of parent participation in the educational evaluation and decision regarding eligibility because Emily has not attained the age of majority (or a formal court declaration retaining the parental rights exists). The Multidisciplinary Evaluation Team included all members required by state regulation. Others may have attended if they had information to contribute regarding Emily. The name and role of each attendee is listed in the signature portion of this report. A copy of the Procedural Safeguards under the Individuals with Disabilities Education Act was provided to the parent upon initial referral for evaluation; upon notification of a MET

Reed, Emily - Multidisciplinary Evaluation Team Report

meeting, upon notification of an IEP meeting, upon notification of reevaluation of the student (if applicable), and at the MET meeting.

Team Members:

Scott Cook 4-7-11
Date
School Psychologist

Joan Cerruto 4/7/11
Date
Kathleen Tatone
Self Joan Cerruto, Dean

Alyson Cerrone 4/7/11
Date
Regular Education Teacher

Julie Fink 4/7/11
Date
Special Education Teacher

Kathy Richter _____
Date
School Nurse

Alicia Kunk 4-7-11
Date
Parent

[Signature] 4/7/11
Date
Other

I have reviewed this report and received a copy. I understand that I can submit a written response or propose changes to this report. I have been notified that I may request to review the information used as the basis for this report.

Alicia Kunk
Parent Signature

10-11 Rogich, Sig MS 235 N Pavilion Center Dr, Las Vegas NV 89144 Generated on 04/17/2019 09:43:10 AM Page 1 of 1	Reed, Emily Enrollment History Date: 04/17/2019
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Enrollment History

Grade	Type	Calendar (Schedule Name)	Start Date	End Date
08	P	10-11 Rogich MS	08/30/2010	06/09/2011
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
07	P	09-10 Rogich MS	08/24/2009	06/02/2010
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
06	P	08-09 Rogich MS	08/25/2008	06/05/2009
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
05	P	07-08 Staton ES	08/27/2007	06/04/2008
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
04	P	06-07 Staton ES	08/28/2006	06/07/2007
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
03	P	05-06 Staton ES	08/29/2005	06/08/2006
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
02	P	04-05 Staton ES	08/30/2004	06/09/2005
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				
01	P	03-04 Lummls ES TK3	08/27/2003	08/06/2004
Local Start Status: E1 First Entry in a school for the current school year				
Local End Status: W1A1 Student completed school year-Technology Department use only				
State Start Status: E1 First entry in a school for the current school year				
State End Status: W1A1 Student completed school year. Rollover at the end of year except for graduates.				

APR 17 2019
STUDENT RECORD SERVICES
RESP'T APP 0332

ER 001352

EXHIBIT 2

EXHIBIT 2

EXHIBIT 2
RESP'T APP 0333

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

SELPA: <u>West Orange County SELPA</u>		DISTRICT: <u>Huntington Beach Union High School District</u>
Casemanager: <u>Rae Roisman</u>		
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Triennial <input type="checkbox"/> Individual Transition Plan <input checked="" type="checkbox"/> Other <u>30 day</u>		
IEP Date: <u>09/26/2011</u>	Current Annual IEP: <u>09/26/2011</u>	Current Evaluation: <u>04/07/2011</u>
SPED Entry Date: <u>05/14/2008</u>	Next Annual IEP: <u>09/26/2012</u>	Next Evaluation (Tri): <u>04/07/2014</u>
<input type="checkbox"/> Review by: _____		

1. STUDENT INFORMATION

Last Name Reed First Name Emily Middle: _____

DOB: [REDACTED] Age: 16 ☐ Male ☒ Female Grade: 09 Ninth grade

District ID No. [REDACTED] CSIS ID No. _____

Student Address: [REDACTED]

State: CA Zip: [REDACTED]

Ethnicity: 501 Non Hispanic Race 1. 700 White Race 2. _____ Race 3. _____

Migrant: ☒ No ☐ Yes Native Language: English

EL: ☒ No ☐ Yes English Proficiency: ☐ Fluent ☐ Limited ☐ Redesignated Interpreter: ☒ No ☐ Yes

Responsible Adult: Alicia Reed

☒ Parent ☐ Guardian ☐ Conservator ☐ Surrogate Parent ☐ Other _____

Home Ph: none Work Ph: [REDACTED]

Cell: [REDACTED] Email: _____

Address: _____ City: _____ State: CA Zip: _____

(If different than student address)

Other Responsible Adult (state name, address, phone and relationship - include person holding educational rights if necessary): _____

2. RESIDENTIAL STATUS

☒ Parent or legal guardian ☐ Licensed children's institution ☐ Foster family home

☐ Hospital(except state hospital) ☐ Residential Facility ☐ Incarcerated Institution

☐ State hospital ☐ Developmental Center ☐ Other _____

If the child has been placed into an LCI or FFH provide name of Agency and Contact Person: _____

District of Residence: Huntington Beach Union High School District District Providing Education: Huntington Beach Union High School District

District Assigned Home Residence School: Huntington Beach High

School of Attendance: Huntington Beach High School Type: 10 Public day school

If student is served outside of resident district, explain: _____

SELPA Placing Student: _____

RESP'T APP 0334

ER 001353

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011**3. DISABILITY**

- | | | |
|--|--|---|
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Hard of Hearing* | <input type="checkbox"/> Deafness* |
| <input type="checkbox"/> Speech or Language Impairment | <input type="checkbox"/> Visual Impairment* | <input type="checkbox"/> Established Medical Disability |
| <input type="checkbox"/> Orthopedic Impairment* | <input type="checkbox"/> Other Health Impairment | <input type="checkbox"/> Emotional Disturbance |
| <input checked="" type="checkbox"/> Specific Learning Disability | <input type="checkbox"/> Deaf-Blindness* | <input type="checkbox"/> Multiple Disability |
| <input type="checkbox"/> Autism | <input type="checkbox"/> Traumatic Brain Injury | |
- * Low Incidence Disability

☐ Secondary Disability (if applicable): 220 Hard of Hearing (HH)

Describe how student's disability affects involvement and progress in the general curriculum (or for preschoolers, participation in appropriate activities): *Emily has academic deficits and a diagnosed hearing loss which impacts her ability in the classroom.*

- Plan Type:
- ☐ Individualized Education Program (IEP)
 - ☐ Individual Family Service Plan (IFSP)
 - ☐ Individual Service Plan (ISP)
 - ☐ Pending Initial Evaluation
 - ☐ Eligible - No Education Plan (Parent Declined FAPE, Private Placement)
 - ☐ Eligible - No Education Plan (Other Reasons)
 - ☐ Not Eligible

☐ Exiting from Special Education (returned to general education/no longer eligible)

Date of Exit: _____ Reason: _____

4. OTHER AGENCY SERVICES

- | | | | |
|---|--|---|--------------------------------------|
| <input type="checkbox"/> Regional Center | <input type="checkbox"/> CCS | <input type="checkbox"/> Dept of Rehabilitation | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> County Mental Health | <input type="checkbox"/> Dept of Social Services | <input type="checkbox"/> Probation | |

If your child has Medi-Cal; health insurance benefits may be accessed by the District for applicable services such as OT, Speech and Language, etc.

Additional Cover Page Comments (if needed):

RESP'T APP 0335
ER 001354

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**Last Name ReedFirst Name EmilyDOB [REDACTED]IEP Date: 9/26/2011**5. STRENGTHS/INTERESTS/LEARNING PREFERENCES AS IDENTIFIED BY PARENTS, STAFF AND STUDENTS**

Emily is a quiet girl who completes her assignments and prefers to work independently. Emily is polite, punctual, and attentive in her classes.

Concerns of parent relevant to educational progress:

Mom wants counseling for Emily to deal with decision making skills and forming thoughts. Mom is also concerned about Emily's hearing.

6. PRESENT LEVELS OF PERFORMANCE**PRE-ACADEMIC/ACADEMIC/COGNITIVE/FUNCTIONAL SKILLS (including recent STAR Assessment Results)**☐ Not an area of unique need

English-Reading Comprehension and Writing. Emily has average skills in the area of decoding with some difficulties observed in words of foreign origin. Reading comprehension is below average with errors noted in making inferences and drawing conclusions. Some difficulties relating to vocabulary knowledge were observed.

COMMUNICATION DEVELOPMENT☒ Not an area of unique need**MOTOR DEVELOPMENT**☒ Not an area of unique need

Fine

Gross

SOCIAL/EMOTIONAL DEVELOPMENT☐ Not an area of unique need

Emily needs to improve self-advocacy skills especially when it is necessary to ask a question for clarification and/or directions. Case manager will refer Emily to the school counselor.

ADAPTIVE/DAILY LIVING SKILLS☒ Not an area of unique need**RESP'T APP 0336****ER 001355**

VOCATIONAL☒ Not an area of unique need**7. HEALTH**Hearing Screening: (R) _____ (L) _____
Date _____Vision Screening: (R) _____ (L) _____
Date _____Health Alert ☐ No ☐ Yes

If yes, special health condition is:

Specialized Health Care Procedure ☐ No ☐ Yes

If yes, identify:

8. SPECIAL FACTORS1. **Behavior:** Does student's behavior impede his/her learning or that of others?☒ No ☐ Yes☐ BSP ☐ BIP ☐ Behavior Goal ☐ Other: _____2. **Communication:** Is the student Deaf or Hard of Hearing?☒ No ☐ Yes3. **Vision:** Is the student Blind or Visually Impaired?☒ No ☐ Yes4. **Assistive Technology:** Does the student require assistive technology devices or services?☐ No ☐ Yes5. **Low Incidence:** Does the student require low incidence services, equipment and/or materials to meet educational goals?☒ No ☐ Yes6. **English Learner:** Is the student an English learner?☒ No ☐ Yes

If yes, English Proficiency Level: ----

If yes to any special factors, clarify and describe:

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011**9. CLASSROOM and/or CURRICULAR ACCOMMODATIONS/MODIFICATIONS**

Evaluation of the student in the general education curriculum:

☐ Student is expected to meet the same standards of curriculum content mastery as non-special education students within the classroom **-WITHOUT ACCOMMODATIONS.**

☒ Student is expected to meet the same standards of curriculum content mastery as non-special education students within the classroom **-WITH ACCOMMODATIONS:** *Emily may have preferential seating if desired, may have additional time on tests/quizzes in general ed. classes, may take tests/quizzes in Spec. Ed. classroom if desired.*

☐ The student will be exposed to the general education curriculum in order to develop positive social skills, and/or gain academic competence in the curriculum. Student will require accommodations and will receive **MODIFIED** curriculum for the following classes:

☐ The student will be exposed to the general education curriculum in order to develop positive peer interaction, improve social skills, and/or gain academic competence in the curriculum. Student will require accommodations and modifications and will **NOT** receive a grade for the following classes:

10. PARTICIPATION IN STATE and/or DISTRICT ASSESSMENTS

Student will participate in the following assessments during the school year(check all that apply):

☐ **Preschool**

☐ DRDP-R

☐ DRDP-A

☒ **California Standard Tests (CST) and/or CMA, or CAPA:**

☒ **English Language Arts (ELA)** (Grades 2-11; CMA only applies to grades 3-11)

10 CST Without testing accommodations

☒ **Math** (Grades 2-11; CMA only applies to grades 3-11)

10 CST Without testing accommodations

☒ **Algebra 1** (End-of-course Algebra 1 grades 7-11)

CST Without testing accommodations

☐ **Science** (Grades 5, 8-11; CMA only applies to grades 5 and 8; and end-of-course Life Science Grade 10)

10 CST Without testing accommodations

☒ **History-Social Science** (Grades 8-11; CMA does not apply)

10 CST Without testing accommodations

☐ **Writing** (Grades 4 & 7 only; CMA only applies to grade 4 and 7)

10 CST Without testing accommodations

If participating in the CAPA, select Level: _____

The student will not participate in the CST or CMA and CAPA is appropriate because:

☐ **California English Language Development Test (CELDT)**(For English Learners only)

☐ **Standards based Tests in Spanish STS**(For English Learners only)

RESP'T APP 0338

ER 001357

☐ **California High School Exit Examination (CAHSEE) 10 Without testing accommodations**

☐ CAHSEE/ELA ☐ Passed Date: _____ Score: _____

☐ CAHSEE/Math ☐ Passed Date: _____ Score: _____

☐ **Physical Fitness (5th,7th,9th Grades Only)**

☐ **District Wide Assessments**

Additional Notes (if needed):

RESP'T APP 0339

ER 001358

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011Goal No: 5.2.4 Proposed Goal Adopted By IEP Team ☐ No ☐ Yes Date Adopted:**11. ANNUAL GOAL (Form B)**Area of Need: Reading Comprehension

Goal Baseline: *Reading includes letter and word identification, vocabulary, and comprehension skills. Emily's performance on Reading is comparable to that of the average individual at grade 5.1 from the normative sample. This is within the low average range of scores obtained by others at her grade level, as shown by her percentile rank (13) and standard score (83). Emily currently performs this skill with 60% accuracy.*

Measurable Annual Goal: *(Annual Goal) By 9/26/2012, after reading a brief passage at Emily's independent reading level or grade level, when asked to draw inferences, conclusions, or generalizations about text, Emily will use prior knowledge to make and confirm inferences, conclusions, or generalizations and support them with textual evidence with 75% accuracy in 2 of 3 trials as measured by student work samples/teacher-charted observations.*

- ☒ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☐ Supports the following Post-Secondary Goals
☐ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible: SpEd teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0340

ER 001359

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011Goal No: 5.2.5 Proposed Goal Adopted By IEP Team ☐ No ☐ Yes Date Adopted:**11. ANNUAL GOAL (Form B)**Area of Need: Reading Comprehension

Goal Baseline: *Emily is well-behaved in her classes and works very hard. She is able to stay focused for the entire block period. Emily does tend to take anything written as factual and is often confused between the difference between a fact and an opinion. She currently performs this skill with 60% accuracy.*

Measurable Annual Goal: (Annual Goal) *By 9/26/2012, after reading/listening to an expository text selection, when asked questions based on said text selection, Emily will distinguish between facts, supported inferences, and opinions with 75 % accuracy in 3 consecutive trials as measured by teacher observations/student work samples.*

- ☒ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☐ Supports the following Post-Secondary Goals
☐ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible: SpEd teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0341

ER 001360

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011Goal No: 4.1.10 Proposed Goal Adopted By IEP Team ☐ No ☐ Yes Date Adopted:**11. ANNUAL GOAL (Form B)**Area of Need: Written Language

Goal Baseline: *Writing includes punctuation, capitalization, spelling and word usage skills. Emily's performance on Writing is comparable to that of the average individual at grade 2.2 from the normative sample. This is within the very low range of scores obtained by others at her grade level, as shown by her percentile rank (1) and standard score (54). Emily currently performs this skills earning 1's and 2's on the rubric.*

Measurable Annual Goal: *(Annual Goal) By 9/26/2012, after completing a first draft, Emily will edit and revise for coherence and progression of the writing process by adding, deleting, consolidating, and/or rearranging text to produce an edited version scoring at least 3 on the writing rubric in 2 of 3 trials as measured by student work samples.*

- ☒ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☐ Supports the following Post-Secondary Goals
☐ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible: SpEd teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0342

ER 001361

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name EmilyDOB [REDACTED]IEP Date: 9/26/2011Goal No: 8-12.5.0 Proposed Goal Adopted By IEP Team ☐ No ☐ Yes Date Adopted:**11. ANNUAL GOAL (Form B)**Area of Need: Algebra

Goal Baseline: *Emily is a good worker in her math class. She attempts all problems but often makes careless mistakes that go uncorrected throughout the entire operation. She does well with basic operations in math including problems with regrouping. She can solve problems involving fractions but sometimes has difficulty with converting to a common denominator. She is able to solve a simple algebraic equation but not more complex ones and is unable to complete problems involving percentages. Emily currently performs this skill with 70 accuracy.*

Measurable Annual Goal: *(Annual Goal) By 9/26/2012, when given a series of multi-step linear problems and word problems at Emily's independent reading level, involving one variable, Emily will solve linear equations and inequalities with 80% accuracy in 3 of 4 trials as measured by student work samples/criterion assessment.*

- ☒ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☐ Supports the following Post-Secondary Goals
☐ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible:

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0343

ER 001362

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/26/2011**12. INSTRUCTIONAL SETTINGS/SERVICES**

Programs and services will be provided according to when student is in attendance and consistent with the public school calendar and scheduled services, excluding holidays, vacations and non-instructional days unless otherwise specified.

12a. Services considered by the IEP Team based on the student's educational needs and adopted goals:

- ☒ General Education
☐ Specialized Academic Instruction in General Education
☒ Specialized Academic Instruction outside General Education
☐ Related Services: _____
☐ Other: _____

12b. Free Appropriate Public Education (FAPE) based on the student's unique educational needs and adopted goals.

Service: <u>Specialized Academic Instruction</u>		Delivery: <u>Group</u>	Class Type: _____
From: <u>09/26/2011</u>	To: <u>09/26/2012</u>	Duration/Frequency: <u>450 x 3 150 min session(s)</u>	Weekly Totalling: <u>450 min</u>
Provider: <u>District of Service</u>		Location: <u>Separate classroom in public integrated facility</u>	
Notes: <u>high school block schedule</u>			

Parent will be informed of Progress: ☒ Quarterly ☐ Trimester ☐ Semester ☐ Other _____

How? ☒ Progress Summary Report ☐ Other _____

Data Collection for Transportation:

Requires Special Education Transportation ☒ No ☐ Yes

- ☐ Consideration for wheelchair and/or other medical equipment
☐ Requires Child Safety Restraint System (CSRS)
☐ Other: _____
☐ Eligible for transportation, however parent declined offer and will transport student

Data Collection for Mental Health:

Is the student Eligible for Mental Health Services under CH 26.5 AB3632:

☐ No ☐ Yes

Is a Mental Health Ch 26.5 AB3632 Service Plan Attached to the IEP and services documented above:

☐ No ☐ Yes

If yes, list individual services in service box above.

Is the CH 26.5 AB3632 Service Plan Accepted by Parent or Adult Student:

☐ No ☐ Yes ☐ N/A

12c. Due to the student's unique needs identified in the present levels and goals, the student will not participate in the general education environment:

- ☒ for general education academic curriculum: English
☐ in non-academic and/or extracurricular activities: _____
☐ for related services: _____
☐ at school of residence; educational placement will be provided at: _____

12d. Activities to support transition (e.g., preschool to kindergarten, special education and/or NPS to general education class, 8th -9th grade):

13. EXTENDED SCHOOL YEAR (ESY)

The student demonstrates a handicapping condition which is likely to continue indefinitely or for a prolonged period; interruption of service for a prolonged period may cause regression based on the student's limited capacity to recoup skills; and specific area of need has been identified through the student's goal and objectives. ☐ Yes ☒ No

RESP'T APP 0344

ER 001363

WEST ORANGE COUNTY SELPA INDIVIDUALIZED EDUCATION PROGRAM

Last Name: ReedFirst Name: EmilyDOB: [REDACTED]IEP Date: 9/26/2011**SIGNATURE AND PARENT CONSENT****IEP MEETING PARTICIPANTS**

<u>X</u> <u>Alan Leeds</u> Parent/Guardian/Surrogate	<u>9-26-11</u> Date	_____ Parent/Guardian/Surrogate	_____ Date
<u>R. Hareanu</u> LEA Representative/Admin Designee	<u>9-26-11</u> Date	_____ General Education Teacher	_____ Date
<u>Emily Reed</u> Student	<u>9-26-11</u> Date	<u>Tae J. Kim</u> Special Education Specialist	<u>9/26/11</u> Date
_____ Additional Participant/Title	_____ Date	_____ Speech & Lang Pathologist	_____ Date
_____ Additional Participant/Title	_____ Date	_____ Additional Participant/Title	_____ Date
_____ Additional Participant/Title	_____ Date	_____ Additional Participant/Title	_____ Date

CONSENT

Please initial all that apply:

AL I have received and have been given an opportunity for a full explanation of the Procedural Safeguards.AL I have received a copy of assessment reports, if presented.AL I agree with this Individualized Education Program in its entirety._____
I agree with this Individualized Education Program except for: __________
I understand that my child is not eligible for special education._____
I understand that my child is no longer eligible for special education.

Signature below is to authorize and approve the IEP

Signature: Alan Leeds
☒ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student9-26-11
DateSignature: _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student_____
Date

As a means of improving services and results for your child, did the school facilitate parent involvement?

☒ Yes ☐ No ☐ No response given**RESP'T APP 0345****ER 001364**

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name Reed

First Name Emily

DOB [REDACTED]

Date: _____

IEP TEAM MEETING COMMENTS

Notetaker's Initials: _____

Notes:

Emily will be referred to Newport Speech and Hearing based on a current audiological exam which shows moderate/severe hearing loss.

Emily will be referred to the high school counselor for services dealing with decision making skills.

RESP'T APP 0346

ER 001365

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

SELPA: West Orange County SELPA
Casemanager: Rae Roisman

DISTRICT: Huntington Beach Union High School District

☐ Initial ☒ Annual ☐ Triennial ☐ Individual Transition Plan ☐ Other _____

IEP Date: 09/21/2012

Current Annual IEP: 09/21/2012

Current Evaluation: 09/21/2012

SPED Entry Date: 05/14/2008

Next Annual IEP: 09/21/2013

Next Evaluation (Tri): 04/07/2014

☐ Review by: _____

1. STUDENT INFORMATION

Last Name Reed

First Name Emily

Middle: _____

DOB: [REDACTED]

Age: 17

☐ Male ☒ Female

Grade: 10 Tenth grade

District ID No. 386964

CSIS ID No. _____

Student Address: [REDACTED]

State: CA Zip: [REDACTED]

Ethnicity: 501 Non Hispanic

Race 1. 700 White

Race 2. _____

Race 3. _____

Migrant: ☒ No ☐ Yes

Native Language: English

EL: ☒ No ☐ Yes English Proficiency: ☐ Fluent ☐ Limited

☐ Redesignated

Interpreter: ☒ No ☐ Yes

Responsible Adult: Alicia Reed

☒ Parent ☐ Guardian ☐ Conservator ☐ Surrogate Parent ☐ Other _____

Home Ph: none

Work Ph: [REDACTED]

Cell: [REDACTED]

Email: _____

Address: _____

City: _____

State: CA Zip: _____

(If different than student address)

Other Responsible Adult (state name, address, phone and relationship - include person holding educational rights if necessary):

2. RESIDENTIAL STATUS

☒ Parent or legal guardian

☐ Licensed children's institution

☐ Foster family home

☐ Hospital(except state hospital)

☐ Residential Facility

☐ Incarcerated Institution

☐ State hospital

☐ Developmental Center

☐ Other _____

If the child has been placed into an LCI or FFH provide name of Agency and Contact Person: _____

District of Residence: Huntington Beach Union High School District

District Providing Education: Huntington Beach Union High School District

District Assigned Home Residence School: Huntington Beach High

School of Attendance: Huntington Beach High School Type: 10 Public day school

If student is served outside of resident district, explain: _____

SELPA Placing Student: _____

RESP'T APP 0347

ER 001366

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012**3. DISABILITY**

- | | | |
|--|--|---|
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Hard of Hearing* | <input type="checkbox"/> Deafness* |
| <input type="checkbox"/> Speech or Language Impairment | <input type="checkbox"/> Visual Impairment* | <input type="checkbox"/> Established Medical Disability |
| <input type="checkbox"/> Orthopedic Impairment* | <input type="checkbox"/> Other Health Impairment | <input type="checkbox"/> Emotional Disturbance |
| <input checked="" type="checkbox"/> Specific Learning Disability | <input type="checkbox"/> Deaf-Blindness* | <input type="checkbox"/> Multiple Disability |
| <input type="checkbox"/> Autism | <input type="checkbox"/> Traumatic Brain Injury | |
- * Low Incidence Disability

☐ Secondary Disability (if applicable): 220 Hard of Hearing (HH)

Describe how student's disability affects involvement and progress in the general curriculum (or for preschoolers, participation in appropriate activities): *Emily has academic deficits and a diagnosed hearing loss which impacts her ability in the classroom.*

- Plan Type:
- ☐ Individualized Education Program (IEP)
 - ☐ Individual Family Service Plan (IFSP)
 - ☐ Individual Service Plan (ISP)
 - ☐ Pending Initial Evaluation
 - ☐ Eligible - No Education Plan (Parent Declined FAPE, Private Placement)
 - ☐ Eligible - No Education Plan (Other Reasons)
 - ☐ Not Eligible

☐ Exiting from Special Education (returned to general education/no longer eligible)

Date of Exit: _____ Reason: _____

4. OTHER AGENCY SERVICES

- | | | | |
|---|--|---|--------------------------------------|
| <input type="checkbox"/> Regional Center | <input type="checkbox"/> CCS | <input type="checkbox"/> Dept of Rehabilitation | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> County Mental Health | <input type="checkbox"/> Dept of Social Services | <input type="checkbox"/> Probation | |

If your child has Medi-Cal; health insurance benefits may be accessed by the District for applicable services such as OT, Speech and Language, etc.

Additional Cover Page Comments (if needed):

RESP'T APP 0348

ER 001367

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012**5. STRENGTHS/INTERESTS/LEARNING PREFERENCES AS IDENTIFIED BY PARENTS, STAFF AND STUDENTS**

Emily is a quiet girl who completes her assignments and prefers to work independently. Emily is polite, punctual, and attentive in her classes.

Concerns of parent relevant to educational progress:

mom want amplification due to hearing loss. Requests an assessment by the audiologist.

6. PRESENT LEVELS OF PERFORMANCE**PRE-ACADEMIC/ACADEMIC/COGNITIVE/FUNCTIONAL SKILLS (including recent STAR Assessment Results)**☐ Not an area of unique need

English-Reading Comprehension and Writing. On the STAR Assessment given 5/1/12, Emily scored within the Basic range in English Language Arts with a scaled score of 325. Her Math score was 360 placing her in the Proficient range. On the Reading Honors Placement Test, her Comprehension was a grade equivalent of 8.9 (within grade level), Vocabulary was a grade equivalent of 10.0 (above grade level) and Reading was a grade equivalent of 9.2 which is right a grade level.

COMMUNICATION DEVELOPMENT☒ Not an area of unique need**MOTOR DEVELOPMENT**☒ Not an area of unique need

Fine

Gross

SOCIAL/EMOTIONAL DEVELOPMENT☐ Not an area of unique need

Emily needs to improve self-advocacy skills especially when it is necessary to ask a question for clarification and/or directions.

ADAPTIVE/DAILY LIVING SKILLS☒ Not an area of unique need**RESP'T APP 0349****ER 001368**

VOCATIONAL
☒ Not an area of unique need

7. HEALTH
Hearing Screening: (R) _____ (L) _____
Date _____

Vision Screening: (R) _____ (L) _____
Date _____

Health Alert ☐ No ☐ Yes

If yes, special health condition is:

Specialized Health Care Procedure ☐ No ☐ Yes

If yes, identify:

8. SPECIAL FACTORS
1. **Behavior:** Does student's behavior impede his/her learning or that of others?

☒ No ☐ Yes

☐ BSP ☐ BIP ☐ Behavior Goal ☐ Other: _____

2. **Communication:** Is the student Deaf or Hard of Hearing?

☐ No ☒ Yes

3. **Vision:** Is the student Blind or Visually Impaired?

☒ No ☐ Yes

4. **Assistive Technology:** Does the student require assistive technology devices or services?

☐ No ☒ Yes

5. **Low Incidence:** Does the student require low incidence services, equipment and/or materials to meet educational goals?

☐ No ☒ Yes

6. **English Learner:** Is the student an English learner?

☒ No ☐ Yes

If yes, English Proficiency Level: ----

If yes to any special factors, clarify and describe:

Parent has requested that student has access to an FM device for sound amplification in classes.

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012**9. CLASSROOM and/or CURRICULAR ACCOMMODATIONS/MODIFICATIONS**

Evaluation of the student in the general education curriculum:

☐ Student is expected to meet the same standards of curriculum content mastery as non-special education students within the classroom **-WITHOUT ACCOMMODATIONS.**

☒ Student is expected to meet the same standards of curriculum content mastery as non-special education students within the classroom **-WITH ACCOMMODATIONS:** Emily may have preferential seating if desired, may have additional time on tests/quizzes in general ed. classes, may take tests/quizzes in Spec. Ed. classroom if desired.

☐ The student will be exposed to the general education curriculum in order to develop positive social skills, and/or gain academic competence in the curriculum. Student will require accommodations and will receive **MODIFIED** curriculum for the following classes:

☐ The student will be exposed to the general education curriculum in order to develop positive peer interaction, improve social skills, and/or gain academic competence in the curriculum. Student will require accommodations and modifications and will **NOT** receive a grade for the following classes:

10. PARTICIPATION IN STATE and/or DISTRICT ASSESSMENTS

Student will participate in the following assessments during the school year(check all that apply):

☐ Preschool

☐ DRDP-R

☐ DRDP-A

☒ California Standard Tests (CST) and/or CMA, or CAPA:

☒ English Language Arts (ELA) (Grades 2-11; CMA only applies to grades 3-11)

10 CST Without testing accommodations

☒ Math (Grades 2-11; CMA only applies to grades 3-11)

10 CST Without testing accommodations

☒ Algebra 1 (End-of-course Algebra 1 grades 7-11)

CST Without testing accommodations

☐ Science (Grades 5, 8-11; CMA only applies to grades 5 and 8; and end-of-course Life Science Grade 10)

10 CST Without testing accommodations

☒ History-Social Science (Grades 8-11; CMA does not apply)

10 CST Without testing accommodations

☐ Writing (Grades 4 & 7 only; CMA only applies to grade 4 and 7)

10 CST Without testing accommodations

If participating in the CAPA, select Level: _____

The student will not participate in the CST or CMA and CAPA is appropriate because:

☐ California English Language Development Test (CELDT)(For English Learners only)

☐ Standards based Tests in Spanish STS(For English Learners only)

RESPT APP-0351

ER 001370

☒ **California High School Exit Examination (CAHSEE) 10 Without testing accommodations**

☒ **CAHSEE/ELA** ☐ **Passed** **Date:** _____ **Score:** _____

☒ **CAHSEE/Math** ☐ **Passed** **Date:** _____ **Score:** _____

☐ **Physical Fitness (5th,7th,9th Grades Only)**

☐ **District Wide Assessments**

Additional Notes (if needed):

RESP'T APP 0352

ER 001371

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012Goal No: Self Advocacy Proposed Goal Adopted By IEP Team ☐ No ☒ Yes Date Adopted: 09/21/2012**11. ANNUAL GOAL (Form B)**Area of Need: Self AdvocacyGoal Baseline: Emily is very quiet and shy. Teachers report that she seldom asks for help when needed.Measurable Annual Goal: By 9/21/2013, Emily was seek help when needed by asking questions in classes, attending tutorials or asking between classes 4 out of 5 times as measured by classroom teacher reports and grades.

- ☐ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☒ Supports the following Post-Secondary Goals
☒ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible: Special Ed. teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0353

ER 001372

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012Goal No: Reading Comp. Proposed Goal Adopted By IEP Team ☐ No ☒ Yes Date Adopted: 09/21/2012**11. ANNUAL GOAL (Form B)**Area of Need: Reading Comprehension 6.3.2

Goal Baseline: *Emily was enrolled in a General Education English class during her 9th grade year and earned an A grade. She also took a Reading Class and earned an A in that class also. Her ELA score on the STAR is within the Basic range with a scaled score of 325. Her Comprehension score on the Reading Honors Placement Test shows a grade equivalent of 8.9. Emily is very motivated in her classes and works hard to achieve excellent grades.*

Measurable Annual Goal: *(Annual Goal) By (date), when given an appropriate grade level text to analyze, Emily will describe the qualities of the character on the plot and resolution of the conflict in 2 of 3 trials with 90% accuracy as measured by student work samples.*

☒ Enables student to be involved/progress in general curriculum
☐ Addresses other educational needs resulting from the disability
☐ Linguistically appropriate (addresses EL Students)
☒ Supports the following Post-Secondary Goals
☒ Education/Training ☐ Employment ☐ Independent Living
 Person(s) Responsible: Special Education Teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:
Making appropriate progress to meet annual goal?☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0354

ER 001373

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012Goal No: Written Lang. Proposed Goal Adopted By IEP Team ☐ No ☒ Yes Date Adopted: 09/21/2012**11 ANNUAL GOAL (Form B)**Area of Need: Written Language 6.2.2

Goal Baseline: *Emily has a grade equivalent score of 10.0 on the Reading Honors Test. Teachers report that Emily does well in class with writing and she earned an A grade in her general education English class last year. Emily remains in a Gen. Ed. class for English this year. Emily currently performs this skill with 75% accuracy.*

Measurable Annual Goal: (Annual Goal) *By 9/21/2013, when given a menu of expository compositions (description, exploration, comparison and contrast, problem solutions, argument, critique), Emily will write a multi-paragraph essay choosing an organizational strategy that aids reader understanding by stating thesis, purpose or position, using supporting documentation that offers relevant evidence and validates arguments or reader concerns and counterarguments with 90% accuracy in 2 of 3 trials as measured by teacher-made writing rubric.*

☒ Enables student to be involved/progress in general curriculum☐ Addresses other educational needs resulting from the disability☐ Linguistically appropriate (addresses EL Students)☒ Supports the following Post-Secondary Goals☒ Education/Training ☐ Employment ☐ Independent LivingPerson(s) Responsible: Special Ed. teacher

Annual Goal Met?

☐ No ☐ Yes

Date Annual Goal Met: _____

Assistive Technology and/or Supplementary Aids to support the goal:

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Comments:

Short Term Objective Report:

Making appropriate progress to meet annual goal?

☐ No ☐ Yes

Recommend modifying goal?

☐ No ☐ Yes

Additional Comments:

RESP'T APP 0355

ER 001374

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name Emily

DOB [REDACTED]

IEP Date: 9/21/2012**12. INSTRUCTIONAL SETTINGS/SERVICES**

Programs and services will be provided according to when student is in attendance and consistent with the public school calendar and scheduled services, excluding holidays, vacations and non-instructional days unless otherwise specified.

12a. Services considered by the IEP Team based on the student's educational needs and adopted goals:

- ☒ General Education
☐ Specialized Academic Instruction in General Education
☒ Specialized Academic Instruction outside General Education
☐ Related Services: _____
☐ Other: _____

12b. Free Appropriate Public Education (FAPE) based on the student's unique educational needs and adopted goals.

Service: Specialized Academic Instruction Delivery: Group Class Type: _____From: 09/21/2012 To: 09/21/2013 Duration/Frequency: 30 x 1 30 min session(s) Monthly Totaling: 30 minProvider: District of Service Location: Separate classroom in public integrated facilityNotes: consultationParent will be informed of Progress: ☒ Quarterly ☐ Trimester ☐ Semester ☐ Other _____How? ☒ Progress Summary Report ☐ Other _____

Data Collection for Transportation:

Requires Special Education Transportation ☒ No ☐ Yes

- ☐ Consideration for wheelchair and/or other medical equipment
☐ Requires Child Safety Restraint System (CSRS)
☐ Other: _____
☐ Eligible for transportation, however parent declined offer and will transport student

12c. Due to the student's unique needs identified in the present levels and goals, the student will not participate in the general education environment:

- ☐ for general education academic curriculum: _____
☒ in non-academic and/or extracurricular activities: Workability
☐ for related services: _____
☐ at school of residence; educational placement will be provided at: _____

12d. Activities to support transition (e.g., preschool to kindergarten, special education and/or NPS to general education class, 8th -9th grade):

13. EXTENDED SCHOOL YEAR (ESY)

The student demonstrates a handicapping condition which is likely to continue indefinitely or for a prolonged period; interruption of service for a prolonged period may cause regression based on the student's limited capacity to recoup skills; and specific area of need has been identified through the student's goal and objectives. ☐ Yes ☒ No

RESP'T APP 0356

ER 001375

**WEST ORANGE COUNTY SELPA
INDIVIDUAL TRANSITION PLAN**

Name: Emily ReedBirthdate: [REDACTED]IEP Date: 9/21/2012Student Invited: ☒ Yes ☐ NoIf Appropriate, and agreed upon, agencies invited: ☒ Yes ☐ No ☐ Not ApplicableDescribe how the student participated in the process: ☒ Attended IEP Meeting ☐ Interview ☐ Inventory ☐ Questionnaire

Age-appropriate transition assessments/instruments were used: ☒ Yes ☐ No Describe the results of the assessments:
Freshman-COIN

Student's Post Secondary Goal Training or Education (Required):

Upon completion of school I will *attend college and study to become a dietician*

Linked to Annual Goal # 2Person/Agency Responsible: *ITP Team*

Transition Service Code as Appropriate:

330 Specialized Academic Instruction

Activities to Support Post Secondary Goal:

pass all classes needed to earn a high school diploma

Community Experiences as Appropriate:

complete all college entrance requirements

Related Services as Appropriate:

330 Specialized Academic Instruction

Student's Post Secondary Goal Employment (Required):

Upon completion of school I will *look for a job in an area of interest*

Linked to Annual Goal # 1Person/Agency Responsible: *ITP Team*

Transition Service Code as Appropriate:

330 Specialized Academic Instruction

Activities to Support Post Secondary Goal:

Emily will register with the Department of Rehabilitation

Community Experiences as Appropriate:

Emily will attend job shadow field trips in areas relevant to her career interests

Related Services as Appropriate:

330 Specialized Academic Instruction

Student's Post Secondary Goal Independent Living (As appropriate):

Upon completion of school I will *continue living at home until financially stable*

Linked to Annual Goal # 1Person/Agency Responsible: *ITP Team*

Transition Service Code as Appropriate:

330 Specialized Academic Instruction

Activities to Support Post Secondary Goal:

explore apartment rentals in an area of choice

Community Experiences as Appropriate:

Related Services as Appropriate:

RESP'T APP 0357

ER 001376

Name Reed, Emily

Birthdate



Page ____ of ____

IEP Date: 9/21/2012

**WEST ORANGE COUNTY SELPA
INDIVIDUAL TRANSITION PLAN**

District Graduation Requirements:

Course of Study

A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their post secondary goal. ☒ Yes ☐ No

Units/Credits Completed: 60

Units/Credits Pending: 160

Diploma: ☒ Yes ☐ No

Certificate of Completion: ☐ Yes ☐ No

Anticipated Completion Date: 06/19/2015

CAHSEE (High School Exit Exam)

☐ CAHSEE/ELA date: _____

Score: _____

☐ Passed ☐ Did not pass

☐ CAHSEE/Math date: _____

Score: _____

☐ Passed ☐ Did not pass

☐ CAHSEE Other: _____

Age of Majority:

☒ On or before the student's 17th birthday, he/she has been advised of rights at age of majority (age 18)

By whom: R. Roisman

Date: 09/21/2012

When you reach the age of 18, the age of majority, you have the right to receive all information about your educational program and make all decisions related to your education. This includes the right to represent yourself at an IEP meeting and sign the IEP in place of your parent or guardian.

The student's IEP includes appropriate measurable postsecondary goal or goals that covers the education or training, employment, and as needed independent living? ☒ Yes ☐ No

Is (are) the postsecondary goal(s) updated annually? ☒ Yes ☐ No

Are there transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)?

☒ Yes ☐ No

Is (are) there annual IEP goal(s) related to the student's transition services needs? ☒ Yes ☐ No

RESP'T APP 0358

ER 001377

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM**

Last Name ReedFirst Name EmilyDOB [REDACTED]IEP Date: 9/21/2012**SIGNATURE AND PARENT CONSENT****IEP MEETING PARTICIPANTS**

Parent/Guardian/Surrogate	Date	Parent/Guardian/Surrogate	Date
LEA Representative/Admin Designee	Date	General Education Teacher	Date
Student	Date	Special Education Specialist	Date
Additional Participant/Title	Date	Speech & Lang Pathologist	Date
Additional Participant/Title	Date	Additional Participant/Title	Date
Additional Participant/Title	Date	Additional Participant/Title	Date

CONSENT

Please initial all that apply:

_____ I have received and have been given an opportunity for a full explanation of the Procedural Safeguards.

_____ I have received a copy of assessment reports, if presented.

_____ I agree with this Individualized Education Program in its entirety.

_____ I agree with this Individualized Education Program except for: _____

_____ I understand that my child is **not** eligible for special education._____ I understand that my child is **no longer** eligible for special education.

Signature below is to authorize and approve the IEP

Signature: _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student_____
DateSignature: _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student_____
Date

As a means of improving services and results for your child, did the school facilitate parent involvement?

☒ Yes ☐ No ☐ No response given**RESP'T APP 0359****ER 001378**

WEST ORANGE COUNTY CONSORTIUM FOR SPECIAL EDUCATION
Multidisciplinary Psycho-Educational Assessment Report

CONFIDENTIAL

Student: Emily Reed	School / District: HBHS/HBUHSD
Date of Birth: [REDACTED]	Teacher: Rae Roisman
Age at Time of Assessment: 16-9	Grade: 11
Parent(s)/ Guardian(s): Alicia Kremidas and Jeffory Reed	Phone: [REDACTED]
Address: [REDACTED]	
Date(s) of Assessment: September 9-16, 2013	Date of Report: September 20, 2013
Primary Language: English	
Current Placement/Services: Specialized Academic Instructions 1 X 30 Minutes Monthly in the form of consultation, and Career Awareness 1x 50 Minutes Yearly	
Examiners: Tiffany Do (School Psychologist), Erin Dorsey (School Nurse), Rae Roisman (Special Education Teacher), & Natalie Fabian (School Psychology Practicum Student)	

REASON FOR REFERRAL

A reassessment of an individual with exceptional needs is conducted at least every three years (Triennial Assessment). Emily's initial special education evaluation was in 5/14/2008 and her last triennial IEP evaluation was 4/7/2011. Existing assessment data, including assessments and information provided by the parent(s)/guardian(s), current classroom-based assessments and observations, and teacher and related service providers' observations was reviewed. Additional data is needed to determine:

- if Emily continues to have a disability,
- if Emily continues to need special education and related services
- Emily's present levels of performance,
- Emily's unique needs, and
- appropriate revisions to the IEP.

TESTING AND ASSESSMENT MATERIALS

The testing and assessment materials and procedures used for this assessment were selected and administered so as not to be racially, culturally, or sexually discriminatory. The tests and other assessment materials have been validated for the specific purpose for which they were used, and were administered in conformance with the instructions for the test or other assessment materials. The tests and other assessment materials include those tailored to assess specific areas of educational need. No single procedure was used to determine Emily's eligibility for special education and/or determine appropriate educational programming.

Definition of assessment terms:

- Standard Scores and Scaled Scores are referenced to a child's age.
 - Standard Scores have a mean of 100 and a standard deviation of 15. Average range would include scores from 85 to 115, using these end points as extremes. A score of 2 or more standard deviations, or roughly 30 points or more below

100 would indicate a significant delay. (Note: certain tests, for example the Gillian Autism Rating Scale, report Standard Scores that have a different statistical basis.)

- Scaled scores have a mean of 10 and a standard deviation of about 3. Average would be indicated by scores of about 8 to 12. Scores 6 or more points below 10 represent significant delay.
- The Age Equivalent score is the age of a child who would attain the same number of items correct as this child on a specific measure.
- A Percentile represents the percentage of children of the same age in the norm sample who scored below this student on this test.
- A Confidence Interval (e.g. 90-110) represents the range of scores between which this student's true score falls, with a 90 or 95 percentage of certainty.
- T Scores- A *T-Score* is a standard score with a mean of 50 and a standard deviation of 10.

Components of this assessment include:

- Review of school records
- Grade/Credit Check
- Attendance review
- Parent report
- Student interview/ observation
- Teacher interviews
- Review of Health and Developmental History/ Nurse Evaluation
- *The Kaufman Assessment Battery for Children, Second Edition (KABC-II)*
- *Wide Range Assessment of Memory and Learning- 2nd Edition (WRAML-2)*
- *Woodcock Johnson Test of Achievement, 3rd Edition (WJ-III)*
- *Behavior Assessment System for Children, Second Edition (BASC-2)*

BACKGROUND INFORMATION/ CURRENT PROGRAM/ PSYCHOLOGIST COMMENTS

Emily's background information was gathered from interviews, her school records and information contained in a previous assessment report dated 4/7/2011.

Emily lives with her mother and two brothers in Huntington Beach, California. She visits her father in Las Vegas, Nevada about every other weekend and seven weeks during the summer. Emily indicates that she would like her parents to be together.

The school nurse, Erin Dorsey conducted a health evaluation of Emily on 9/17/2013. Emily's affect and demeanor are appropriate to the situation. Emily's vision was normal and she failed her hearing examine. Vital signs are within normal limits (B/P 96/48 HR 58). Pupils are PERRL and extraocular muscles are intact. Lung sounds are clear to auscultation. Emily's last doctor's appointment was two months ago and dental exam was two weeks ago. No obvious dental caries were noted. Emily states that she attempts to eat healthy. Her BMI is 19.1 which places Emily is in the normal weight category. Her graphomotor sample appears to be within normal limits.

The student health appraisal form was completed by Alecia Kremidas, Emily's biological mother. Emily has a hearing deficit per mother. Emily hearing has been tested several times and failed. The last report received from the audiologist indicated Emily is very inconsistent during testing which might suggest the reason for failing is not due to her hearing, but processing the sound.

Emily will be required to test with the school district audiologist in order to determine what type of hearing loss she has and possible hearing aides.

Emily's mother, reports that Emily is a very hard worker. She sets goals and does not give up. Emily never breaks rules. She is kind and loving. Emily is very organized and is willing to try new things that most kids would not. Emily struggles with understanding basic information and concepts. She takes a very long time to fully understand what is going on in books, movies, and television shows. Emily cannot answer most common information. She usually does not want to disappoint her parents and self so she will not voice her opinion. She has great difficulties with reading and spelling. Ms. Kremidas' concern for Emily is that Emily does homework all the time. She has no balance between school, friends, and activities outside of school. Emily tests poorly but does all of the extra credits to maintain her A's. Ms. Kremidas stated, "This is not realistic in real world." Ms. Kremidas would like to see Emily leave California and Las Vegas for college. Emily's mother wants Emily to find her passion and do something she loves. Ms. Kremidas shared that Emily wants a garden and 8 children and that Ms. Kremidas would love that for Emily.

Emily is currently receiving services in career awareness training for 1 x 50 minutes yearly; and is placed in all general education classes. In addition, Emily is currently working on annual IEP goals in the areas of self-advocacy, reading comprehension, and written language.

REVIEW OF EXISTING ASSESSMENT DATA/ EDUCATIONAL HISTORY

Emily was initially assessed as a fifth grade student. She received services as a student with a hearing impairment (primary eligibility) and specific learning disability (secondary eligibility). However, the triennial evaluation dated 4/7/2011 indicated that Emily was deemed ineligible under the hearing impaired criteria. This report stated that Emily met the eligibility criteria for specific learning disability.

Emily attended school in the Clark County School District until the completion of the 8th grade. Emily then transferred to Huntington Beach High School. In her ninth grade year, she earned a 4.00 GPA in the fall semester and a 4.00 in the spring semester. On the ninth grade state testing, Emily scored Basic on English Language Arts and Biology. She scored Proficient on General mathematics. In the first semester of her tenth grade year, Emily received a 4.00 GPA and 3.83 GPA during the second semester. Her STAR results indicate Proficient in Algebra I, Biology, and Science. She performed within the Basic range on English-Language Arts. Emily is currently in the first semester of her eleventh grade year and she is on track for graduation. She has completed 120 credits of the required 220 credits toward graduation requirements. Emily has passed the English-Language Arts (score 390/350) and Mathematics (score 410/350) portions of the CAHSEE. From 8/29/2012 to 6/13/2013, Emily attended school 97.61% of the time. She is currently attending her classes 99.02% of the time from 8/29/13 to 9/20/13. Emily is receiving services in career awareness training and is placed in all general education classes.

EFFECTS OF ENVIRONMENTAL, CULTURAL OR ECONOMIC DISADVANTAGE, IF ANY

Emily's linguistic, racial and ethnic background were considered prior to the selection and interpretation of evaluation procedures and measures; therefore, this evaluation is considered to be a valid and reliable reflection of her current level of functioning. Furthermore, based upon the information obtained during the course of this evaluation, no educational, environmental,

economic disadvantage or cultural, ethnic difference is considered the primary factor influencing Emily's educational difficulties.

PRIMARY LANGUAGE OR OTHER MODE OF COMMUNICATION

Current school record identifies Emily's primary language as English. She was assessed by the examiners in English.

STUDENT INTERVIEW/ OBSERVATIONS (Including Career/Vocational Abilities & Interests)

Interview

Emily was interviewed to determine her likes and dislikes, in addition to identifying her long-term and short-term goals. During the interview, Emily was pleasant and responded appropriately and in-detail to all of the questions asked of her. Emily lives with her biological mother and two brothers. She has regular contact with her father, who lives in Las Vegas. Emily wishes that her parents are together.

The best thing Emily likes about school is learning new information. The one thing she does not like regarding school is being in a big-size classroom. Emily finds Math to be easy and English difficult. Emily states, "English is hard because it requires a lot of reading which is hard." Emily shares that she reads slow and has difficulty remembering what she read. Emily says she learns best visually. She says that she does not get in trouble at school. The one thing Emily would like to change about school is "more one-on-one time with teachers."

At home, Emily helps out around the house by getting water, cleaning her room, and helping out with dinner.

Socially, Emily seems to be on the shy and reserved side. She reports having five close friends that are mostly around her age. Emily says she has a best friend who lives in Las Vegas. She enjoys spending time with her best friend when she is in Las Vegas visiting her father. Emily enjoys running with her friends. When asked about relationships with her friends, Emily replied that she does not have problems getting along with her friends. She reports that she chooses not to hang out with friends outside of school because she wants to focus on her school work in order to maintain her A's in all her classes.

When asked about her short term goals, Emily says, "Get straight A's." Her long term goals include having a family, go to college, and travel to Japan. Emily shares that she participated in a foreign exchange program over the past summer. She says she went to Japan for two weeks and really liked the culture and country. If Emily could do anything in the future, she would travel around the world.

Emily says that if she could have three wishes, she would wish for 1) a sister to talk to, 2) school to come easier to her because high school is really challenging, and 3) a world peace because she hates to see people getting hurt. If Emily could change one thing about herself, it would be to be able to cope with overwhelming situations. Emily expresses that she worries about her grades and public speaking.

Observations

Emily was observed in a Geometry Class during 3rd period on 9/17/13. She was very focused on her work and only looked at her desk or the teacher during the entire period. She was working before the bell even rang. Emily was completely silent during the entire class and didn't respond

to any group questions, or talk to peers for drawing activity at the end of class when her peers were working with others. During class Emily appeared to be around 2 minutes behind the teacher's instruction as evidenced by her focusing her attention on the second board used in the lecture 2 minutes after her classmates. She erased her work, after teacher corrected a problem they were instructed to work on independently. When copying problems from the board, or pictures from paper to paper on her desk, she looked back and forth frequently. During the 80% of the class period Emily sat with her hand on her forehead, when she looked up at the teacher's work or instructions she look confused and/or scared.

Emily was observed in a American Sign Language Class during 4th period on 9/17/13. She was on task 100% of the observation. During the class they were taking a quiz and then working on a crossword puzzle. Unlike in Geometry, Emily did not place her hand on her forehead the entire observation. While taking the test, she was meticulous with her work as evidenced by her erasing work, writing slowly and neatly, and straightening papers and pens on her desk. She did talk to a peer once during an appropriate time to clarify directions on the worksheet. At the end of the observation, the teacher noted that Emily "was amazing" in her class.

COGNITIVE ABILITY

Based on Emily's performance on the KABC-2, there were great discrepancies between her performance on the sequential memory scale and the rest of the other scales. Emily scores should be interpreted with caution due to her history of hearing impairment.

Previous assessments dated 4/7/2011 indicate that there is variability between Emily's intellectual skills. Her verbal ability was SS 85, nonverbal SS 97, composite memory SS 47, and composite intelligence index was SS 89. Emily's score on the Test of Nonverbal Intelligence, third edition was SS 65 on form A and SS 95 on form B when administered on two separate days. There were indications of cognitive or intellectual deficits, which may be a result of Emily's hearing impairment or auditory processing.

The school psychologist administered the KABC-2 to Emily on 9/12//2013. The KABC-II is an individually administered measure of the processing and cognitive abilities of children and adolescent aged three through eighteen. It measures a range of abilities including sequential and simultaneous processing, learning, reasoning, and knowledge/crystallized ability. The KABC-II consists of 18 subtests that are grouped into five scales that correspond to processing areas and broad abilities from the Luria and Cattell-Horn-Carroll (CHC) models. The five KABC-II scales are Sequential/Gsm, Simultaneous/ Gv, Learning/Glr, Planning/ Gf, and Knowledge/Gc. Each scale is the same whether the Luria or CHC model is being used. The psychologist computes either the Luria Mental Processing Index (MPI) or the CHC Fluid-Crystallized Index (FCI) for any child or adolescent being evaluated. The FCI includes the Knowledge/Gc scale whereas the MPI does not. This "dual-theoretical" basis of the KABC-II allows psychologists to administer it to bilingual students, children with moderate or severe language disabilities, or children with autism. The Nonverbal Scale allows the psychologist to assess students with hearing loss, moderate to severe speech or language disabilities, limited English proficiency, and so forth.

Kaufman Assessment Battery for Children-second edition; norms based on age			
Scale/ Subtest	Standard Score average = 100; average range = 85 – 115 Scale Scores Average = 10 Average range = 8-12	Percentile Rank percent of all students who score at or below this level	Classification
Fluid-Crystallized Index (FCI)	78	7	Below Average
Sequential/Gsm	57	0.2	Lower Extreme
Number Recall	3	1	Lower Extreme
Word Order	2	0.4	Lower Extreme
Simultaneous/Gv	89	23	Average
Rover	6	9	Below Average
Triangles	5	5	Below Average
Block Counting	10	50	Average
Planning/Gf	85	16	Low Average
Story Completion	6	9	Below Average
Pattern Reasoning	9	37	Average
Learning/Glr	86	18	Low Average
Atlantis	8	25	Low Average
Rebus	7	16	Below Average
Knowledge/Gc	90	25	Average
Verbal Knowledge	9	37	Average
Riddles	7	16	Below Average

Fluid-Crystallized Intelligence (FCI) is an overall measure of cognitive ability. Emily received a standard score (SS) of 78. Emily's true score is estimated to fall somewhere between 73 and 83. This is within the below average range and is at the 7th percentile rank.

On the Sequential portion of the KABC-II, Emily received a SS of 57 (CI 50-68) which is at the 0.2nd percentile rank. This is within the extremely low range. Sequential measures a student's short term memory and their ability to briefly hold information in their mind and then use it. On the Number Recall subtest, Emily was required to listen to a list of numbers and repeat them back in the order they were presented. The list increased in length as the test progressed. Emily was able to recall up to 4 numbers. Emily received a scaled score of 3 which is at the 1st percentile rank. On the Word Order subtest, Emily was read a list of words and was required to recall the words by pointing to a picture of the word in the order in which the words were read. The task increased in difficulty with more words being read each time. More difficult items include an interference task (color naming) between the stimulus and response. Emily received a scaled score of 2 which is at the 0.4th percentile rank. She was able to recall a sequence of 3 words without the color interference task.

The Simultaneous section of the assessment measures a student's visual processing abilities; how well she is able to perceive, manipulate, and think with visual patterns. Emily received a SS of 89 (CI 80-100) which is in the average range and at the 23rd percentile rank. Emily experienced great difficulty with envisioning and counting the hidden blocks on the Block Counting subtest.

The Learning section measures the long term memory retrieval of students; how well they are able to remember information, store it, and then recall it at a later time. Emily received a SS of 86 (CI 78-94) which is within the low average range and at the 18th percentile rank.

In the area of Planning, Emily received a SS of 85 (CI 74-98) which is within the low average range and at the 16th percentile rank. Planning measures a student's ability to solve novel verbal and non verbal problems by requiring them to use inference, reasoning, and an understanding of implications. On the Story Completion subtest, which required Emily to look at a row of pictures that tell a story with some pictures missing and choose from a set of pictures the ones that are needed to complete the story, she worked slowly but carefully on each item. Emily received a scaled score of 6 and at the 9th percentile rank. Pattern Reasoning required Emily to look at a series of stimuli that form a pattern with one piece missing. She then had to complete the pattern by selecting the missing piece from an array of stimuli. Emily work through this subtest slowly reasoning quietly to herself to solve the patterns. She demonstrated that this subtest was not challenging for her. Emily received a scaled score of 9 on this subtest which is at the 37th percentile rank.

In the area of Knowledge, Emily received a SS of 90 (CI82-98) which is within the average range and is at the 25th percentile rank. Knowledge measures a student's acquired knowledge from within their culture as well as how they apply that knowledge. On the subtest of Verbal Knowledge, Emily was required to select from an array of 6 pictures the one that illustrates the meaning of vocabulary word or the answer to general information prompt. Emily was able to identify pictures of words or information such as "lethargic", "accumulate", "a scene from the Industrial Revolution", and "excavate". Emily received a scaled score of 9 on this subtest which is at the 37th percentile rank. On the subtest of Riddles, the examiner says several characteristics of a concrete or abstract verbal concept and Emily is required to name it. Emily was able to name "republic", "coupon", "enamel", and "ticket" when its description was presented to her verbally. Emily received a scaled score of 7 on this subtest which is at the 16th percentile rank. Emily will find language loaded tasks somewhat challenging.

The Nonverbal Index is comprised of Story Completion, Triangles, Block Counting, Pattern Reasoning, and Hand Movements. Emily's nonverbal ability is estimated to be within the below average range with a standardize score of 81 and at the 10th percentile rank.

Emily demonstrated variability in her intellectual abilities especially with the Sequential or short-term memory tasks. It is noted that Emily processed information slowly and her responses were often 20-30 seconds delayed. Emily also asked the examiner to repeat items more frequently than other examinees. Additionally, she requested that the examiner increase her voice volume. This examiner if lead to believe that Emily's hearing deficit may be interfering with her ability to process information.

MEMORY AND PSYCHOLOGICAL PROCESSING

Based on her performance on the WRAML-2, Emily's overall memory ability falls in the lower extreme range of functioning when compared to peers her age. Emily demonstrated variability in her ability to recall verbally and visually presented information and concentration and attention.

Wide Range Assessment of Memory and Learning- 2nd Edition (WRAML-2)

The examiner administered the Wide Range Assessment of Memory and Learning Second

Edition (WRAML2) to Emily on 9/16/2013. The WRAML2 is design to assess an individual's immediate memory and/or delay recall memory as well as differentiating between verbal, visual or more global memory deficits. The WRAML2 is comprised of six core subtests that yield three indexes: a Verbal Memory Index, a Visual Memory Index, and an Attention/Concentration Index. These three indexes together form the General Memory Index. Additionally, the WRAML2 measures an individual working memory and general recognition. Working memory is the ability to manipulate auditory information and visual symbolic information. General recognition is the ability to recognize designs and pictures that the subject had previously seen as well as recognize story details and words that the subject had previously heard.

Wide Range Assessment of Memory and Learning- 2nd Edition (WRAML-2) CLUSTERS/Subtests	Standard Score average = 100; average range = 85 to 115	Classification
GENERAL MEMORY	61	Low
VERBAL MEMORY	82	Below Average
Story Memory	6	Below Average
Verbal Learning	8	Average
VISUAL MEMORY	76	Below Average
Design Memory	7	Below Average
Picture Memory	5	Low
ATTENTION/CONCENTRATION	55	Lower Extreme
Finger Windows	1	Lower Extreme
Number Letter	1	Lower Extreme

Emily's general memory is within the low (confidence interval SS 56-69) and at the 0.5th percentile rank.

The Verbal Memory Index is an estimate of how well an individual can learn and recall both meaningful verbal information and relatively rote verbal information. It is derived from the sum of the Story Memory subtest and the Verbal Learning subtest. When consistent performance exists between the two subtests comprising this index, the index presents a reasonable estimate of verbal memory abilities. More specifically, Verbal Memory Index performance is correlated with abilities for everyday tasks (e.g., remembering stories, conversations, or information from lectures; following directions; recalling items from a "things to do" list). Related academic tasks can include the ability to recall the content of information that was read earlier, the ability to learn lists of scientific terms, or the ability to remember vocabulary words. Emily's Verbal Memory Index of SS 82 (90% CI: 76-90; Percentile rank: 12) was found to be within the Below Average range. Generally, within this range on the Verbal Memory Index, Emily should be expected to struggle with learning and remembering verbal information at the same rate as children of similar age.

The Visual Memory Index is an estimate of how well the individual can learn and recall both meaningful (i.e., pictorial) and minimally related, rote (i.e., design) visual information. It is derived from the sum of the Picture Memory subtest and the Design Memory subtest. When consistent performance exists between the two subtests comprising this index, the index presents a reasonable estimate of visual memory ability. More specifically, visual memory abilities may be related to day-to-day tasks (e.g., remembering the layout of the town visited a while ago, identifying different car models, remembering the location of states on a map).

Related academic tasks can include the recall of information from the chalkboard, some aspects of math problems (e.g., graphs, spatial problems), and processing/recalling less verbal or nonverbal aspects of science/technology like a circuit diagram). Emily's Visual Memory Index of SS 76 (90% CI: 69-86; Percentile rank: 5) was found to be within the Below Average range. Generally within this range on the Visual Memory Index, Emily should be expected to have great difficulty with remembering visual information at the levels of children of similar age and this should be noticeable on everyday visual memory tasks.

The Attention/Concentration Index is an estimate of how well the student can learn and recall relatively non-meaningful rote, sequential information. It is the sum of two subtests, Finger Windows and Number Letter. When consistent performance exists between the two subtests comprising this index, the index presents a reasonable estimate for tasks requiring brief attentional demands and/or immediate rote recall abilities. More specifically, performance on the Attention/Concentration Index is correlated with performance on everyday tasks (e.g., remembering a dictated telephone number until it can be written down, remembering visual details of a highway sign or a billboard that one has driven by in the car). Related academic tasks can include learning phonetically irregular spelling words and following the specific details and/or a sequence of oral directions. Emily's Attention/Concentration Index of SS 55 (90% CI: 49-68; Percentile rank: 0.5) was found to be within the Lower Extreme range. Generally, within this range on the Attention/Concentration Index, Emily should perform rote memory tasks at a much lower level than children of similar age.

ACADEMIC ACHIEVEMENT

Completed by Rae Roisman, case manager on 9/6/2013

The Woodcock Johnson III Tests of Achievement includes nine subtests in the standard battery: three each in Reading, Written Language, and Mathematics. In each area there is a skills assessment, a fluency assessment, and an applications assessment.

Woodcock-Johnson III Tests of Achievement, Form [A/B]; norms based on [age/grade]			
CLUSTERS/Subtests	Standard Score average = 100; average range = 85 to 115	Percentile Rank percent of all students who score at or below this level	Classification
TOTAL ACHIEVEMENT	87	19	Low Average
BROAD READING	77	06	Below Average
Letter-Word Identification	95	38	Average
Reading Fluency	68	02	Low
Passage Comprehension	92	29	Average
BROAD WRITTEN LANGUAGE	81	10	Below Average
Spelling	82	12	Below Average
Writing Fluency	77	07	Below Average
Writing Samples	107	68	Average
BROAD MATH	99	46	Average
Calculation	111	77	Average
Math Fluency	83	13	Below Average
Applied Problems	95	37	Average

Academic Area	Strengths	Weaknesses
Reading	Letter Word is a strong area for Emily. She has good phonics skills	Reading Fluency is a challenge probably due to her processing
Written Language	Writing Samples is a very strong area for Emily	Writing Fluency is a weaker area due to the difficulty processing on a timed test.
Math	Math Calculation is Emily's strongest area.	Math Fluency is weaker due to difficulty processing on a timed times.

Emily is in all general education classes and earns mostly A's. She is an incredibly dedicated and conscientious student. She does prefer to take tests in a special ed. Classroom due to the quieter nature and less students. She also takes advantage of the extra time afforded to her on tests and quizzes. Emily does have a processing disorder which affects her performance on timed tests or in stressful situations.

Recommendation

Continue placement as it is with special education supports and assistance. Continue to work on Emily being comfortable with being a self advocate as well.

Teacher Reports

Below are reports from Emily's current teachers.

Mrs. Shields, American Sign Language teacher, reports that Emily is a happy and polite student. She is quick to learn. She sits up front and always looks at the teacher. Emily seems very organized. Mrs. Shields does not identify any concerns at this time. Emily has an A in the class.

Ms. Stills, Chemistry teacher reports that she is satisfied with Emily's academic skills. She feels Emily is performing at grade level. Ms. Still says Emily seems shy and lacks classroom participation.

Ms. Capp, US History teacher, reports that Emily is an ideal student when dealing with respect, attentiveness, and work ethic. She is also a very kind young woman. Emily works diligently in class but does not actively participate in class discussions. Emily does not socialize with other others in class. She has excellent behavior and relationships with adults. Emily is timid, but Ms. Capp has yet to notice any dire issues. Emily completes all assignments thoroughly and accurately. Ms. Capp shares that Emily asked to sit close to the teacher during lectures. Overall, Emily is a pleasure to have in class.

Mr. McLaughlin, English teacher, reports that Emily is off to a good start. She has a positive attitude. Mr. McLaughlin indicates that it is too soon to give an accurate report on Emily. Emily currently has an A in English.

Ms. Shackelford, cross country coach, reports that Emily is a great and positive kid. She has excellent relationships with peers and adults. There are no concerns at this time.

Ms. Brady, Geometry teacher, reports that Emily is a very diligent and hard-working student. She always has an amiable personality towards Ms. Brady and her peers. Emily rarely participates in class which makes it difficult for Ms. Brady to gauge her level of understanding of concepts. Emily does well working by herself and asking questions during tutorial. Overall, Emily has solid work habits, positive behavior, and has a lot of potential to succeed in class.

SOCIAL-EMOTIONAL FUNCTIONING/MALADAPTIVE BEHAVIORS

Emily is a pleasant, polite, respectful, and sensitive young woman. She is easy to talk to and can adequately carry on a conversation. According to teachers, self, and parent rating scales of the BASC-2, Emily exhibits similar social and emotional behavior problems as her peers in the school setting. Ms. Kremidas, mother, rates Emily clinically significant on the subclinical scales of Anxiety, Atypicality, Withdrawal, and Functional Communication. She rated Emily at-risk on Leadership.

SUMMARY

Emily is currently an eleventh grade student at Huntington Beach High School. Based on her performance on the KABC-2, Emily's overall cognitive abilities are within the below average range of functioning compared to peers her age. Based on her performance on the WRAML-2, Emily's overall memory ability falls in the low range of functioning compared to peers her age. Emily performed poorly on tests, however Emily was able to consistently maintain GPA's of 3.83 and above with specialized academic instruction consultation services during her ninth and tenth grade years. Current evaluation results indicate that Emily's processing ability may be adversely impacted by her hearing impairment. A record review reveals that Emily has a hearing impairment. An updated audiologist evaluation is pending at this time.

DETERMINATION OF ELIGIBILITY: SPECIFIC LEARNING DISABILITY (SLD)

EC 56337, 56338; CCR 3030(j)

A student meets the eligibility criteria for a specific learning disability if:

1. a severe discrepancy exists between intellectual ability and achievement in one or more of the following areas: oral expression, listening comprehension, written expression, basic reading skills, reading comprehension, mathematics calculation, or mathematics reasoning,
2. the discrepancy is due to a disorder in one or more of the basic psychological processes, including attention, visual processing, auditory processing, sensory-motor skills, and cognitive abilities, including association, conceptualization and expression, and
3. the discrepancy is not the result of environmental, cultural, or economic disadvantages.

A student who is being assessed due to characteristics of "dyslexia" or another reading dysfunction shall be eligible for special education and related services if the student meets the eligibility criteria for a specific learning disability.

It is the assessor's opinion that Emily meets the eligibility criteria for Specific Learning Disability because:

- a severe discrepancy does not exist between intellectual ability and academic achievement.
- however, Emily does demonstrate processing disorders in the area(s) of attention, processing speed, and association that impact her educational performance.

DETERMINATION OF ELIGIBILITY: HEARING IMPAIRED (HI)

CCR 3030(a)

A student meets the eligibility criteria for Hearing Impaired (HI) if the student:

1. has a hearing impairment, either permanent or fluctuating, that impairs the processing of linguistic information through hearing even with amplification, and
2. the hearing impairment adversely affects educational performance.

Processing linguistic information includes speech and language reception and speech and language discrimination.

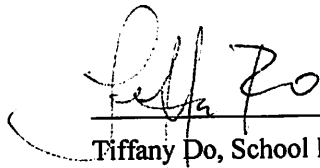
Previous audiological evaluation indicates that Emily showed some significant hearing loss. Emily requires hearing aids. Last school year, the district provided Emily with an FM system but Emily has not used it. A updated audiological evolution is pending at this time.

It is this examiner's opinion that Emily's hearing impairment adversely affects her educational performance and that she may requires special education services. Eligible is pending upon completion of the audiological evaluation.

The assessment results indicate that Emily may meet the eligibility criteria for Hearing Impairment. The IEP Team will take into account all the relevant information that is available on this student to determine the degree of this student's impairment, if any, and whether she requires special education. The IEP Team will make the final determination regarding eligibility and educational programming.

RECOMMENDATIONS

- These assessment results will be shared with the IEP Team to determine if Emily continues to be eligible for special education.
- If the IEP team determines that Emily continues to be eligible for special education, then the IEP team will further determine if Emily's impairments require instruction, services, or both, which cannot be provided with modification of the general education program.
- The IEP Team should consider the following possible unique needs:
 - Attention/Concentration
 - Short Memory
 - Hearing
 - Self-Advocacy
- If Emily's educational needs require more than modification of the general education program, then the IEP Team shall discuss appropriate special education programming in light of her unique needs:
 - Specialized academic instruction/ consultation
 - Extra time on assignments and tests
 - Breaking down large assignments/project (Chunking)
 - Encourage Emily to sit in close proximity of the teacher or near instruction



Tiffany Do, School Psychologist

Huntington Beach High School

Huntington Beach Union High School District

9/20/13

Date

Rae Roisman, Case Manager

Date

Huntington Beach High School

Huntington Beach Union High School District

Erin Dorsey, School Nurse

Date

Huntington Beach High School

Huntington Beach Union High School District

WEST ORANGE COUNTY CONSORTIUM FOR SPECIAL EDUCATION
Social-Emotional Assessment

CONFIDENTIAL

Student: Emily Reed	School / District: HBHS/HBUHSD
Date of Birth: [REDACTED]	Teacher: Rae Roisman
Age at Time of Assessment: 17	Grade: 12
Parent(s)/ Guardian(s): Alicia Kremidas and Jeffory Reed	Phone: [REDACTED]
Address: [REDACTED]	
Date(s) of Assessment: September 16-October 22, 2014	Date of Report: October 22, 2014
Primary Language: English	
Current Placement/Services: Specialized Academic Instructions 1 X 50 Minutes Daily, and Career Awareness 1x 50 Minutes Yearly, & Counseling and Guidance 2X 30 Minutes Weekly	
Examiners: Tiffany Do, School Psychologist & Robyn Moses, Director, Mental Health Services	

REASON FOR REFERRAL

The Huntington Beach Union High School District conducted Emily's triennial evaluation in September 2013 and auditory processing assessment in May, 2014. The current, additional assessment was initiated to further assess Emily's social/emotional functioning at this time and the information will be used to identify any unique needs or eligibility in this area as well as to consider whether she requires educationally related mental health services. The assessment results shall be shared with the IEP Team and Emily's IEP will be revised to the extent appropriate at that time.

PRIMARY LANGUAGE OR OTHER MODE OF COMMUNICATION

Current school record identifies Emily's primary language as English. She was assessed by the examiners in English.

EFFECTS OF ENVIRONMENTAL, CULTURAL OR ECONOMIC DISADVANTAGE, IF ANY

Emily's linguistic, racial and ethnic background were considered prior to the selection and interpretation of evaluation procedures and measures; therefore, this evaluation is considered to be a valid and reliable reflection of her current level of functioning. Furthermore, based upon the information obtained during the course of this evaluation, no educational, environmental, economic disadvantage or cultural, ethnic difference is considered the primary factor influencing Emily's educational difficulties.

TESTING AND ASSESSMENT MATERIALS

The testing and assessment materials and procedures used for this assessment were selected and administered so as not to be racially, culturally, or sexually discriminatory. The tests and other assessment materials have been validated for the specific purpose for which they were used, and were administered in conformance with the instructions for the test or other assessment materials. The tests and other assessment materials include those tailored to assess specific areas of educational need. No

single procedure was used to determine Emily's eligibility for special education and/or determine appropriate educational programming.

Definition of assessment terms:

- Standard Scores and Scaled Scores are referenced to a child's age.
 - Standard Scores have a mean of 100 and a standard deviation of 15. Average range would include scores from 85 to 115, using these end points as extremes. A score of 2 or more standard deviations, or roughly 30 points or more below 100 would indicate a significant delay. (Note: certain tests, for example the Gillian Autism Rating Scale, report Standard Scores that have a different statistical basis.)
 - Scaled scores have a mean of 10 and a standard deviation of about 3. Average would be indicated by scores of about 8 to 12. Scores 6 or more points below 10 represent significant delay.
- The Age Equivalent score is the age of a child who would attain the same number of items correct as this child on a specific measure.
- A Percentile represents the percentage of children of the same age in the norm sample who scored below this student on this test.
- A Confidence Interval (e.g.90-110) represents the range of scores between which this Student's true score falls, with a 90 or 95 percentage of certainty.
- T Scores- A *T-Score* is a standard score with a mean of 50 and a standard deviation of 10.

Components of this assessment include:

- Review of student records, including discipline, attendance, grade reports and particularly April 5, 2011 Multidisciplinary Assessment Report
- Student interview
- Parent interview
- Therapist interview
- Classroom observation
- Teacher input
- Review of Health and Developmental History
- Behavior Assessment System for Children, Second Edition (BASC-2)
- Sentence Completion
- Child Depression Inventory (CDI)
- Beck Youth Inventories (attempted, see test observations)
- Adolescent Psychopathology Scale- short form (APS-SF)
- CRAFFT Screening Questionnaire
- Guess Why Game
- Draw a Person: Screening Procedure for Special Education (DAP:SPED)
- Revised Children's Manifest Anxiety Scales- 2nd edition (RCMAS-2)
- Parenting Relationship Questionnaire
- Parenting Stress Index- short form (PSI-4)
- Developmental/Educational Questionnaire (SAED-2)
- National Stressful Events Survey PTSD Short Scale (NSESSS)
- Suicide Ideation Questionnaire (attempted, see test observations)
- Kinetic Drawing System for Family and School

- Consultation with District and Compass Center Staff

BACKGROUND INFORMATION

Family History

Emily lives with her biological mother and two younger brothers in Huntington Beach, California. Emily's biological father lives in Las Vegas. Emily's mother recently remarried, but her husband lives in a separate home. Emily's mother states that up until Emily was hospitalized in March 2014, the children visited their father regularly every other weekend and seven weeks during the summer. Emily currently does not have regular contact with her father. She describes him as an absentee father. Emily and her family are adjusting to the issues related to her severe traumatic history.

Educational History, including history of special education placement and services

Please refer to Emily's May 2014 assessment report for a more extensive history until that time. Emily completed the 11th grade. She was an instructional assistant for student with disabilities during summer school, where she was very successful with students and was able to practice her sign language skills with the teacher. However, she had few conversations and often guarded interactions with peers or adults.

Previous Assessment Results, including any Independent Educational Evaluations

There have been no additional assessments since Emily's May, 2014 evaluation.

Current Educational Performance

Emily is a twelfth grade female student at Huntington Beach High School. She has been at HBHS since the ninth grade. Emily is currently enrolled in one special education class (Physical Science) and five general education classes (Consumer Math, American Sign Language, English, Economics, and Cross Country). Emily is earning all A's in her classes. It should be noted that prior to March 2014, Emily was meeting the four year college A-G requirements. Currently, Emily's academic needs are compromised in the general education setting due to severe internalizing behaviors. Emily requires accommodations such as extra time on assignments, tests and quizzes not to exceed double assigned time, may take tests in special education classroom if desired, may have preferential seating if desired, variable credits, use of FM device in class, and may leave classroom if needed to visit school psychologist or case manager to assist with emotional needs.

Total/Last Semester GPA:	3.76/3.33
Credits toward graduation:	191 out of 220
Current Attendance:	94.8% as of 10/21/2014
Current Days of Suspension:	0

History of Mental Health and related interventions

Emily received mental health treatment from UCI Medical Center from March 18-April 7, 2014. She was diagnosed with chronic post-traumatic stress disorder, major depressive disorder, and social anxiety

disorder. Emily was discharged from UCI Medical Center on April 7 and was sent to Center for Discovery in Long Beach. Emily received intensive inpatient treatment from Center for Discovery until she was discharged on May 12, 2014. Emily has seen multiple therapists over the past three months. Emily began seeing a therapist, obtained by her mother, who addresses her trauma experiences as well as ongoing family relationships in about June, 2014 and she has continued to see her weekly.

EDUCATIONALLY RELEVANT HEALTH AND MEDICAL INFORMATION

As noted previously, Emily has a history of seeming unhearing or inattentive, and she in fact failed a hearing screening. However, further assessment, utilizing a sedated auditory brain stem response, found her hearing to be within normal limits. At approximately the same time, her performance on an auditory processing test was wholly inconsistent. Her scores often were no different than statistical likelihood of guessing and she frequently missed earlier, easier items when she later correctly answered more difficult items. While it might have appeared at times that Emily had a hearing and/or auditory processing deficit, such performances could also be associated with anxiety or disassociation.

OBSERVATIONS/INTERVIEWS (Including Career/Vocational Abilities & Interests)

Test Behavior

Emily was introduced to the ERMHS School Psychologist when she was sent a "call slip" to come to the health office. The assessor introduced herself and explained the purpose of the meeting. She also attempted to engage in small talk and conversation to establish rapport. Although she was cooperative in going into the office and sitting with the assessor, Emily did not engage in any of this initial conversation. In fact, she was very guarded and did not speak to the assessor for about 45 minutes. When presented with a self-rating instrument, she simply stared at the document for about 10 minutes. Consequently the Beck's Inventory was removed. Since Emily completed the APS-SF at a later date, which measures similar aspects of personality and emotional functioning, the Beck's was not re-introduced.

Throughout the testing during the remaining time on that day and a second day, Emily attempted to convey a cooperative attitude. She would immediately perform any drawing task, but her approach to rating scales was slow. She generally read all the items before initiating any responses or endorsements and she would answer the items out of order, returning several times to earlier items until all the questions were completed. She approached the SIQ in a similar manner, first responding to items 24 and 25, then #3. She would not respond to any more items for more than 10 minutes, instead re-reading the items, and when asked if she could complete the task, she shook her head "no".

Emily was generally silent when asked direct questions, but did answer questions in the Guess Why Game which asks her to guess about the feelings of an imaginary peer. Even then, she frequently asked to have a question repeated and her responses generally began after a long pause, as long as 5 minutes.

When told the tasks were completed, Emily appeared more relaxed and did finally engage in some inconsequential conversation with the examiner. She then was able to answer some questions about her counseling outside of school and very briefly about her relationships with her immediate family members.

School Observation

On 9/11/14, Emily was observed by the school psychology intern during the lunch period at the American Sign Language (ASL) Club meeting for 15 minutes; Emily was 15 minutes late, but did not miss the start of the meeting. The meeting consisted of learning and rehearsing signs for "The Star Spangled Banner", to be performed during the next school assembly. Emily participated in this activity 100% of the time and sat alone at the far end of the classroom during this activity; she did not interact with other club members, but did respond when faculty advisors engaged her. During the meeting, the faculty advisor utilized her FM device while Emily listened to instructions through her earpieces. Later the faculty advisor asked Emily if she could understand the instructions and Emily signed "Sort of." The faculty advisor then reminded Emily that if she was having difficulty understanding anything, Emily could ask questions. During the meeting, Emily appeared calm and attentive to the task.

Student Interview

Emily was interviewed to determine her likes and dislikes as well as her short-term and long-term goals. Emily enjoys cooking, organizing, running, and traveling. Emily indicated that she is frustrated and irritated because she is "used to having a structured plan for [her] life, but at this time, [she] does not have any plans." Emily reported that she is unable to think or plan for the future because she is uncertain about her future. Emily stated she is afraid or anxious about growing up. Emily became quiet, very guarded, and upset when asked about her long-term goals. She did not want to talk about it. Emily was given a questionnaire so that she could write her responses. She stared at the questionnaire for 20 minutes and then tore it up in little pieces.

Sentence Completion was used to elicit Emily's thoughts and feelings in a nonthreatening manner. Emily provided the following responses.

- 1) My dad is unavailable.
- 2) When I can't do what I want to, I try even harder.
- 3) When I grow up, I want a big family.
- 4) My teachers are important people in my life.
- 5) I know it's silly, but I'm afraid of failure.
- 6) My mother is very supportive.
- 7) I would do anything to forget my past.
- 8) I dream about a world without pain.
- 9) When I get mad I scream from the inside.
- 10) Love means many different ideas.
- 11) When my parents tell me to do something, I try my best to get it done.
- 12) The kids I like best are all.

It is noted that Emily only completed sentences that she was comfortable answering. She left half of the sentences blank.

Parent Interview and Input

Mrs. Draper completed the SAED-2 Developmental/Educational Questionnaire and also participated in an unstructured interview. Information from these sources that are noted elsewhere in the report (i.e., family background) are not repeated in this section of this document. Mrs. Draper indicates that she had been worried about Emily for years. She was concerned that she was too quiet and seemed as though she was "not there" and was unable to have or express her own thoughts and feelings. It has always taken her a long time to understand and she has difficulty expressing her emotions.

It was not until Emily's recent disclosure that she had been sexually molested since age 8, that others began to take mother's concerns seriously. Emily was hospitalized this year for suicidal ideations and PTSD symptoms. She spent approximately 30 days at UCI Medical Center, followed by an additional 30 days at Center for Discovery. While at the hospital, Emily tried to minimize herself and withdraw physically, such as by sitting in the closet or bathtub. She was tried on several medications during these two months, which Mrs. Draper indicated made her dopy, and she is not presently taking any medication.

Criminal punishment is still in process of being pursued by authorities in Nevada, where the abuse took place. As such, there is ongoing adjustment issues for Emily, her siblings, and her mother, associated with the trauma.

Mrs. Draper indicated that Emily has never been in trouble at home and has never broken any rules. The family goes to church together weekly and regularly shops, watches movies, or cooks together.

Emily began psychological counseling with Roxanna Grimes this summer. Mrs. Draper was pleased to find a therapist who is spiritually based and also specializes in treating traumatized girls. In some ways, Emily's improved since the therapy, but has simultaneously continued or even had increased symptoms. For example, while she does not have the same "melt downs" at home that are reported to occur at school, Emily can be hyper focused on school work and organizing. While doing homework she often has headaches and vomits.

Emily continues to want a relationship, of some sort, with her father. She also expresses a desire to have him provide answers. He has come to California only a couple of times in the last year. Emily writes to him but he does not reply.

Mrs. Draper's concerns for Emily are mostly regarding the future. For example, will Emily isolate herself and withdraw further after high school or will she be able to go to college, work, engage in basic activities that she does not presently do independently, such as shopping. What types of supports will be available to her.

Teachers' Input

Five of Emily's teachers were interviewed to help identify Emily's strengths and needs, as well as gather information regarding her current program, and circumstances that may contribute to difficulties at school. The teachers interviewed were Mrs. Seeker-Sibiglia (English), Ms. Shackleford (Cross Country Teacher), Ms. Shireman (Science), Ms. Brady (Consumer Math), and Ms. Malone (American Sign Language). In the classroom, Emily is generally quiet and shy. Emily usually has a hard time presenting in front of the class and working in groups. Some of her teachers notice that she is somewhat withdrawn.

Most of her teachers are concern with her peer relations. Emily keeps to herself; she does not reach out to make friends. Emily does not engage in conversation in class. She prefers not to talk or communicate. Emily works hard and often goes beyond on her assignments and takes pride in her work. She is very motivated to do well. According to Ms. Shireman, Emily is an excellent student. She appears happy and engaged every day. Emily's Cross Country, American Sign Language, and English teachers state that they check in with Emily everyday regarding how she is doing. Ms. Malone reports that Emily does well when she provides Emily with a copy of the power point notes or put then on Canvas. If Emily is uncomfortable signing in front of the class, Emily would have an opportunity to sign in front of Ms. Malone. Emily at times does not response to questions verbally. She would prefer to sign or respond with nonverbal gestures. There are times, she would stare at her teachers and give them a confused look requiring the teachers to ask close ended questions to figure things out. Generally, Emily is a pleasure in class. She comes to class organized and prepared to learn.

School Psychologists' Input

Emily is a shy, quiet, and reserve student. Emily experiences severe anxiety, and flashbacks at school. At times, these problems exacerbate into physical symptoms such as stomachaches, headaches, nausea, and vomiting. Emily recently becomes aware that she dissociates with reality. She has demonstrated this behavior at least three times during the school day. Despite these severe problems, Emily tries hard to be positive. She has gone off on a limb to be more social by continuing with her participation in cross country and attending her first school dance. Emily does not exhibit her internalizing behaviors in the classroom. She often asks her teachers for a break when feeling overly anxious and comes to the school psychologist for emotional support and assistance. Emily struggles with identifying her emotions. She frequently does not have the insight or understand her emotions and triggers. Her common respond is "I don't know" or she would shrug her shoulders. This school year so far, she has left class to come to the school psychologist for help with self calming and emotional control or regulation on average of 2-3 times per week ranging from 50 minutes to 2.5 hours. Often Emily tries hard to return to class. She rarely request to go home. Emily focuses on school and cross country to avoid dealing with her emotional problems. She indicates in a counseling session that "[she] does not like to express her emotions or deal with [her] emotions because it's exhausting." Emily responds well to breathing exercises, mindfulness activities, writing in a journal, tearing paper, taking a walk, and drawing.

Private Psychologist's Input

Roxanna Grimes, Emily's private counselor, provided the following information on Emily's progress with therapy:

"In reviewing the recent meetings with Emily, I asked her to give 5 areas she feels she has progressed in. She was quite insightful and in agreement with my review of her progress.

1. She has gained ground in being in touch with and identifying her feelings
2. She has gained personal understanding of the importance of being committed to her healing process
3. Through focus and ability to redirect focus, she is able to more easily control negative emotions before they overtake her
4. She has noticed less need to go to School counselor's office in a given school day
5. Emily displays through self-expression and physical display, an increased confidence in who she is and the hope of finding her niche in the world. "

SOCIAL-EMOTIONAL FUNCTIONING/MALADAPTIVE BEHAVIORS

Behavior Assessment System for Children, Second Edition (BASC -2)

The Behavioral Assessment System for Children, Second Edition (BASC-2) was completed by Emily, Emily's mother, and Ms. Brady (Mathematics teacher). Ms. Brady, Emily's Mathematics teacher has known Emily for two years. The BASC-2 is an integrated system designed to facilitate the differential diagnosis and classification of a variety of emotional and behavioral disorders of children and to aid in the design of treatment plans. Scores in the clinically significant range suggest a high level of maladjustment suggesting the need for an intervention. Scores in the at-risk range may identify a significant problem that may not be severe enough to require formal treatment or may identify the potential of developing a problem that needs careful monitoring. Average indicates that the student is performing about the same as her peers and could be considered an area of relative strength. Ranges not listed are due to differences in questions asked on each form of the BASC-2 or questions not being answered. In addition, several indexes are provided to help examine the validity of the results provided on the BASC-2. These include an F Index to detect "faking bad" or abnormally high symptom reporting, an L Index consisting of items to detect the tendency to "fake good" or provide overly positive information about the student, and a V Index made up of nonsensical items that serve as a basic check of the validity of the responses provided. These indices were all found to be acceptable for the self and teacher rating scales. The parent Consistency Index was found to be within the "Caution" range. Below are the items that Mrs. Kremidas endorsed triggering the Consistency Index.

CONSISTENCY INDEX

Item Response

- 5. Pays attention. Sometimes
- 65. Listens to directions. Often
- 12. Worries about making mistakes. Almost always
- 143. Says, 'I'm afraid I will make a mistake.' Sometimes
- 17. Joins clubs or social groups. Sometimes
- 120. Attends after-school activities. Almost always
- 18. Adjusts well to changes in plans. Sometimes
- 31. Adjusts well to changes in routine. Never
- 35. Has a short attention span. Almost always
- 136. Is easily distracted. Never
- 62. Is effective when presenting information to a group. Never
- 97. Is a 'self-starter.' Almost always
- 82. Is easily upset. Sometimes
- 100. Loses temper too easily. Never
- 129. Is afraid of getting sick. Almost always
- 145. Expresses fear of getting sick. Sometimes

Caution is warranted when interpreting the BASC-2 parent rating scale results.

T Scores of 50 to 59 = normal range; T Scores of 60 to 69 = borderline significance; T Scores of 70+ = clinical significance. In the Adaptive Skills domain, T Scores of 40 to 50 = normal range; T Scores of 30 to 39 = at-risk range; T Scores of 29 and below = clinically significant

Scale Measures	Teacher (Brady)	Parent (Mother)	Self-Report Measures	Student
Behavioral Symptoms Index (BSI) (Hyperactivity, Aggression, Anxiety, Depression, Atypicality, Attention Problems)	50	66*	Emotional Symptoms Index (ESI)	61*
Externalizing Problems Composite	42	37	School Problems Composite	34
Hyperactivity	42	38	Attitude To School	40
Aggression	43	38	Attitude To Teachers	43
Conduct Problems	43	40	Sensation Seeking	30
Internalizing Problems Composite	67*	76**	Internalizing Problems	57
Anxiety	72**	80**	Atypicality	45
Depression	62*	67*	Locus of Control	44
Somatization	60*	68*	Social Stress	56
School Problems Composite	48		Somatization	76**
(Teacher Scale Only)			Sense of Inadequacy	56
Learning Problems (Teacher Scale Only)	56		Anxiety	67*
Attention Problems	40	64*	Depression	45
Atypicality	44	76**	Inattention/Hyperactivity	52
Withdrawal	69*	91**	Attention Problems	61*
			Hyperactivity	42
Adaptive Skills Composite	54	41	Personal Adjustment Composite	36*
Adaptability	52	36*		
Social Skills	63	67	Relations with Parents	46
Leadership	46	42	Interpersonal Relations	42
Study Skills (Teacher Scale only)	58		Self-Esteem	37*

Multidisciplinary Psycho-Educational Assessment Report (continued): Emily Reed

Activities of Daily Living (Parent Scale)		53	Self-Reliance	35*
Functional Communication	47	13**		

*** Indicates areas of borderline concern (at-risk)**

**** Indicates areas of clinically significant concern**

Ms. Brady, Emily's Mathematics teacher, endorsed items suggesting she has very elevated concerns regarding Emily's anxiety. She has borderline concerns regarding the areas of depression, somatization, and withdrawal. Ms. Brady indicated that Emily frequently displays behaviors stemming from worry, nervousness, and/or fear. Emily is at times withdrawn, pessimistic, and/or sad. Emily displays several health-related concerns. Additionally, Emily is seemingly alone, has difficulty making friends, and/or is sometimes unwilling to join group activities in the classroom environment.

Based on results from the parent rating scale, the Internalizing Problems composite-scale T score is 76, with a 90 percent confidence-interval range of 71-81 and a percentile rank of 98. EMILY's T score on this composite scale falls in the Clinically Significant classification range. Mrs. Kremidas' ratings indicate that she has clinically significant concerns with the areas of anxiety, atypicality, withdrawal, and functional communication. She has borderline concerns with depression, somatization, attention problems, and adaptability.

Emily's ratings suggest that Emily has clinically significant concerns with somatization. She endorsed items indicating that she has borderline concerns with anxiety, attention problems, self-esteem, and self-reliance.

According to the BASC-2 results, Emily exhibits elevated to very elevated levels of anxiety, withdrawal, and somatization behaviors at school and home settings.

Children's Depression Inventory

Emily Reed completed the Children Depression Inventory (CDI) on 9/23/2014. CDI is a self-rated depressive symptom inventory for school-aged children and adolescents ages 7-17 years. T-Score of 65 or greater are considered to be clinically significant and T-Score of 45-55 are considered within the average range.

Negative Mood: reflects feeling sad, feeling like crying, worrying about "bad things", being bothered or upset by things, and being unable to make up one's mind.

Interpersonal Problems: reflects problems and difficulties in interaction with people, including trouble getting along with people, social avoidance, and social isolation.

Ineffectiveness: reflects negative evaluation of one's ability and school performance.

Anhedonia: reflects "endogenous depression", including impaired ability to experience pleasure, loss of energy, problems with sleep and appetite, and a sense of isolation.

Negative Self-esteem: reflects low self-esteem, self-dislike, feelings of being unloved, and a tendency to have thoughts of suicide.

Total Score: overall depressive symptomatology across the five areas.

Children's Depression Inventory		
Scales	T-Scores	Classification
Negative Mood	64	Borderline Concern
Interpersonal Problems	54	Average
Ineffectiveness	52	Average
Anhedonia	63	Borderline Concern
Negative Self Esteem	52	Average
Total CDI Score		

Emily endorsed the following statements:

Negative Mood	Interpersonal Problems	Ineffectiveness	Anhedonia	Negative Self Esteem
I am sad many times.	I am bad once in a while.	I do many things wrong.	I have fun in some things.	Things will work out for me O.K.
I worry that bad things will happen to me.	I usually do what I am told.	My schoolwork is alright.	I have fun at school only once in a while.	I do not like myself.
Many bad thing are my fault.	I get along with people.	I can be as good as other kids if I want to.	I have plenty of friends.	I am sure that somebody loves me.
I feel like crying once in a while.	I do not like being with people many times.	Doing school work is not a big problem.	I have trouble sleeping many night.	I think about killing myself but I would not do it.
Things bother me many times.			I am tired many days.	I look O.K.
It is hard to make up my mind about things.			Many days I do not feel like eating.	
			I worry about aches and pains many times.	
			I feel alone many times.	

Draw-A-Person: Screening Procedure for Special Education (DAP:SPED)

The DAP:SPED is a screening procedure in which a student is directed to draw a picture of a woman, man, and self. Pictures are evaluated for the inclusion of elements which may indicate a likelihood of emotional disturbance and whether further assessment of emotional functioning is warranted in a category of either not indicated, indicated, or strongly indicated. Scores are reported as a T-Score and scores less than 55 do not indicate any further assessment warranted, whereas scores between 55-65 indicate further assessment is warranted, and scores above 65 indicate further assessment is strongly indicated

T Score: 59 Further assessment is indicated

Emily's drawings were short and small, which is typically included in drawings by children or adolescent who feel inadequate. They are also anchored to the top left of the page which is often associated with children who are introspective and self-concerned or self-conscious.

The Beck Youth Inventories- Second Edition for Children and Adolescents (BDY-II)

The BDY-II is made up of five self-report inventories can be used separately or in combination to assess symptoms of depression, anxiety, anger, disruptive behavior and self-concept. Each inventory contains 20 statements about thoughts, feelings and behaviors associated with emotional and social impairment in youth. The rater endorses how frequently the statement has been true for them. Scores on all inventories have a mean of 50 with a standard deviation of 10. Scores of 40 or lower on the self-concept scale and 70 or greater on the remaining scales are considered significant and are marked (*).

Although initially presented to her, Emily did not initiate any responses on the Beck's. It was not subsequently reintroduced.

Kinetic Family Drawing

Emily was asked to draw a picture of her family, in which all members of the family are "doing something." She was then interviewed about her drawing, including the thoughts and activities of the persons, both before and after the picture takes place. Emily's responses to the interview questions were provided through gesture or written response. The persons are arranged in separate activities, reflecting a lack of engagement or interaction. She did depict each person in a preferred activity, such that she demonstrates an awareness and caring for their interests. Mom is baking (her occupation) which is an activity outside the home. Her brothers are depicted in recreational activities as Adam is playing a video game and Anthony is surfing. Emily is pictured along an alphabetized chart because she is "organizing." She likes to organize and feel structure and order.

Emily also drew an empty circle labeled "Dad." She expressed a desire for interaction or communication with him and feels that she is trying to maintain some relationship with her father but he is absent. It was also noted that she did not draw her step-father or any other members of his family.

Guess Why Game

The "Guess Why" game provides statements about a girl named Mary and asks Emily to guess why it happened. Although she is responding in regards to an imaginary character, her responses can be inferred

as reflecting her insights, feelings, and desires or expectations, as she must rely on her own experiences and understanding to form responses, yet it does allow her to be less personal than if asked direct questions about herself.

Mary doesn't play with other girls. Why? *She chooses not to.*

Mary's teacher asked her to see her after school. Why? *To talk about her grades.*

When Mary's father came home last night, what happened? *Am I able to skip?*

Mary woke up in the middle of the night. Why? *She had a bad dream.*

Mary had a dream one night. What was it about? *Does it have to be complicated* [It is your choice how to answer]. *Starfish*

Mary brought home her report card yesterday. What happened? *The grades were correct.*

Mary's mother put on her coat and left the house. Why? *To go to the store.*

Mary came home crying the other day. Why? *Her friend hurt her.*

Mary felt mad at her mother one day. Why? *Because she didn't buy her something she wanted.*

Mary went to her room. Why? *To get peace and quiet.*

Mary's feelings are hurt at times. Why? *She's sensitive.*

Mary's mother was very upset about something. Why? *It caused her pain.*

Mary did not come home for supper. Why? *She was staying at a friend's house.*

Yesterday something went wrong. What was it? *She fell off her bike.*

There is something that Mary doesn't like about her father. What is it? *Lack of communication.*

Mary thinks her mother and father don't like her. Why? *They don't give her attention.*

Mary did not want to go to school today. Why? *She didn't want to be with people.*

Mary especially likes one thing about her teacher. Why? *How supportive they are.*

Sometimes she gets angry in school. Why? *There's too much to do.*

Sometimes Mary doesn't do what her mother tells her to do. Why? *She believes she is wrong.* What happens? *She gets grounded.*

Mary wishes she were grown up. Why? *To become independent.*

Sometimes Mary fights with her brother. Why? *She wants him to listen.* What happens? *They make up.*

Mary doesn't like a certain person in school. Why? *She made up a rumor.*

Sometimes Mary gets nervous and upset in school. Why? *She won't complete the assignment in time.*

One day Mary and her mother had a big argument. Why? *They couldn't agree.*

One day, Mary left the house. Why? *To get some fresh air.*

Mary dislikes something about her teacher. Why? *She's an important person in her life.*

Sometimes Mary feels very sad. Why? *She didn't get a very good grade.*

Mary usually likes to be by herself. Why? *She can be herself.*

Mary once wanted to run away from home. Why? *It seemed like the only choice.*

Mary doesn't like to be called on in class. Why? *Too much pressure.*

How old do you think Mary is? *14.*

If Mary could do anything she wanted, what would she do that she can't do now? *Travel the world.*

What does Mary wish for most of all? *Everyone's happiness.*

What is Mary's favorite color? *Orange.*

It should be noted that Emily took a great deal of time before responding, as though weighing each option and response before able to say it aloud. Even the simple question of her favorite color was answered after a 30 second delay.

Many of Emily's responses reflect typical thinking and every day activities, such as that Mary didn't come home for dinner because she was staying at a friend's house. In addition, the conflict and lack of attention from her father is evident as well as themes of feeling self-imposed pressure to perform well, especially in school, which leads to her feeling overwhelmed.

CRAFFT Screening

The CRAFFT is a behavioral health screening tool for use with children under the age of 21 and is recommended by the American Academy of Pediatrics' Committee on Substance Abuse for use with adolescents. It consists of a series of 6 questions developed to screen for high-risk alcohol and other drug use disorders simultaneously. It is a short, effective screening tool meant to assess whether a longer conversation about the context of use, frequency, and other risks and consequences of alcohol and other drug use is warranted.

Emily denied or answered negatively to each of the following during the past 12 months: (1) drank alcohol (more than a few sips), (2) smoked marijuana or hash, and (3) used anything to get high. She also indicated that she has never ridden in a car driven by someone who was "high" or had been using alcohol or drugs. Based on her responses, further evaluation is not warranted and substance misuse is not considered an area of concern for Emily.

Adolescent Psychopathology Scale – Short Form (APS-SF)

The APS-SF is a student self-report on 115 items that examines domains of psychopathology and psychosocial problems. The Student is asked to identify the frequency of their own behaviors and feelings specifically during the past 6 months, in general, in the past 3 months, in the past month, and in the past 2 weeks. Scores are reported as T Scores with an average of 50 and T scores of 65-69 are considered to fall in the mild clinical symptom range, scores of 70 to 79 are in the moderate clinical symptom range, and scores of 80 or above are in the severe clinical symptom range. The test includes validity scales of defensiveness and inconsistency.

<u>Validity Scales</u>	<u>T Score</u>
Defensiveness	49
Inconsistency	45

<u>Clinical Scales</u>	<u>T Score</u>	<u>Range</u>
Conduct Disorder	43	within normal limits
Oppositional Defiant Disorder	39	within normal limits
Substance Abuse Disorder	44	within normal limits
Anger/Violence Proneness	47	within normal limits
Academic Problems	52	within normal limits
Generalized Anxiety Disorder	57	within normal limits
Posttraumatic Stress Disorder	59	within normal limits
Major Depression	57	within normal limits

Eating Disturbance	42	within normal limits
Suicide	52	within normal limits
Self-Concept	58	within normal limits
Interpersonal Problems	51	within normal limits

Emily endorsed ratings in the normal range on all aspects of this measure. Since this is inconsistent with the panic attacks/melt downs, crying, and dissociative behaviors she demonstrates at school, it could be suspected that she intentionally misrepresented her feelings to hide or present herself to make a better impression. However, since her endorsements on the defensiveness scale fell well within the average range, it is more likely that Emily lacks sufficient insight into her mood and feelings, rather than any intentional intent to mislead others.

Revised Children's Manifest Anxiety Scale-2

The RCMAS-2 is a self-rating that assesses the level and nature of anxiety and measures scores on three anxiety-related measures of physiological anxiety, worry, and social anxiety, and these three scales make up the total score, by asking the student to endorse items as either "yes", describing the respondent or "no" not describing the respondent. In addition, a measure of defensiveness and inconsistency assist in determining whether the student's reported information is likely valid. Scores are reported as T-Scores with a mean of 50 and standard deviation of 10. T scores below 40 indicate the respondent is usually anxiety-free and scores

above 60 suggest the respondent has at least some difficulties with anxiety. Scores of 65 or greater are significant and are indicated (*).

<u>Scale</u>	<u>T Score</u>
Defensiveness	60
Total Anxiety	57
Physical Anxiety	57
Worry	56
Social Anxiety	55

While not significantly elevated, Emily's endorsement on the Defensiveness scale is higher than her other scores and one standard deviation above the mean, and so at least somewhat elevated. This reflects difficulty admitting to everyday imperfections that are commonly experienced. As such, her endorsements on other scales may be an underestimate of her true feelings. Again, this may be a reflection of poor insight or an inability to allow herself to acknowledge the feelings she experiences.

Parenting Relationship Questionnaire (PRQ)

The PRQ is a rating scale designed to capture the parent's feelings about the parent-child relationship. It includes a measure of several traditional dimensions that are relevant to the development of strong and healthy parent-child relationships. The rating also includes scores on two scales that measure a tendency to be overly negative (F scale) or overly positive (D scale) to assist in considering the validity of the responses. Subscale scores are reported as T-Scores with an average of 50 and standard deviation of 10. Ranges are classified as lower extreme, significantly below average, average, significantly above average, and upper extreme. T scores on most scales of 30 or below, which fall in the lower extreme, are marked

with an asterisk (*) and denotes significant relationship problems, except on the relationship frustration scale in which a score at or above 70, which falls in the upper extreme, is considered significant and marked with an asterisk (*).

F scale: acceptable
D scale: acceptable

<u>Scale</u>	<u>T-Score</u>	<u>Range</u>
Attachment	42	average
Communication	41	average
Discipline Practices	35	below average
Involvement	55	average
Parenting Confidence	60	average
Satisfaction with School	62	average
Relational Frustration	38	average

Mrs. Draper completed the PRQ and her responses were in the acceptable range on the validity scales indicating it unlikely that she attempted to present herself in an overly positive or negative impression, though she did endorse two items on the defensive scale. As such, this is considered a valid estimate of her perception of her relationship in parenting Emily.

Mrs. Draper reports less than average skills in disciplining Emily, and this likely relates to the fact Emily never has any behavioral problems or breaks any rules in the home. She otherwise endorsed average amounts of satisfaction in all other parenting areas, compared to other mothers of children in Emily's age group. She indicates no significant areas of concern in parenting.

Parenting Satisfaction Scale (PSS)

The PSS is a parent self-rating designed to assess parent-child relationships. It is a 45-item standardized questionnaire that assesses parenting satisfaction in three domains, satisfaction with spouse/ex-spouse parenting performance, satisfaction with the child-parent relationship, and satisfaction with parenting performance, as well as an overall parenting satisfaction. Scores are reported as standard scores with a mean of 50 and T score of 10 so that scores below 35 and greater than 65 are considered significant and marked (*).

<u>Satisfaction with....</u>	<u>Standard Score</u>
Spouse/Ex-Spouse	33*
Parent-Child Relationship	62
Parenting Performance	70*
Overall Parenting Satisfaction	49

It is evident that Mrs. Draper considered her ex-husband, rather than her present spouse in completing this questionnaire. He was responsible for the children when he repeatedly left them in the care of a man who molested Emily and likely exposed her and her siblings to pornography, physically abused her youngest brother, and allowed all three children to be witnesses to some or all of these acts. It is understandable that

Mrs. Draper would be dissatisfied with his parenting performance and cannot rely on his assistance at this time.

Otherwise, Mrs. Draper is pleased with her parenting in forming a relationship with Emily and especially in her performance on parenting tasks. She has no significant concerns or worries in parenting her children.

SUMMARY

Emily is a very shy and socially anxious young lady who also engages in a lot of perfectionistic behaviors as an avoidance coping mechanism. She also exhibits symptoms consistent with the DSM5 criteria for Post-Traumatic Stress Disorder, following years of ongoing sexual abuse: recurrent, involuntary distressing memories of the traumatic event(s), recurrent distressing dreams, and dissociative reactions, persistently avoids stimuli associated with the event(s) by avoiding the distressing thoughts, or feelings about the event, has an inability to remember aspects of the events, persistent inability to experience positive emotions, problems with concentration, and sleep disturbance.

DETERMINATION OF ELIGIBILITY: EMOTIONAL DISTURBANCE (ED)

CCR 3030(i)

Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- Inappropriate types of behavior or feelings under normal circumstances;
- A general pervasive mood of unhappiness or depression.
- A tendency to develop physical symptoms or fears associated with personal or school problems.

Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under paragraph (c)(4)(i) of this section.

Emily has an emotional condition, Post-Traumatic Stress Disorder, which has occurred for years, and especially exacerbated in the school setting in the past 6 or so months. She experiences panic attacks during which she is unable to participate in class and unable or at least significantly limited in her ability to express her basic needs and emotions. She has psychosomatic symptoms, such as headaches and vomiting, at times when completing homework and is socially anxious such that she is generally quiet in class and even in one-to-one conversations with familiar people engages less than typical of her age group and with long delays and difficulty concentrating on even simple questions and making easy decisions. As such, her condition is manifested as inappropriate types of behavior or feelings under normal circumstances and a tendency to develop physical symptoms or fears associated with personal or school problems. These have occurred over a long period of time and to a marked degree. Emily meets the criteria for eligibility as a student with an emotional disturbance.

CONSIDERATION OF EDUCATIONALLY RELATED MENTAL HEALTH SERVICES:

Educationally related mental health services are those related services to assist a child with a disability to benefit from special education such as individual counseling, group counseling, counseling and guidance, social work services, and parent counseling and training.

Parent counseling and training means assisting parents in understanding the special needs of their child; providing parents with information about child development; and, helping parents to acquire the necessary skills that will allow them to support the implementation of their child's IEP.

The IEP team shall make the final determination of whether educationally related mental health services are necessary in order for Emily to access the instructional curriculum and make progress in her special education program. In determining related services, the IEP team may consider that:

Emily's panic and withdrawals in the school setting occur several times per week and interrupt her participation in both academic and social activities;

Emily has received counseling and guidance with some success; and,

Emily's mother endorsed no significant stressors in supporting Emily.

ADDITIONAL RECOMMENDATIONS:

- Emily and Mrs. Draper may wish to contact the National Alliance on Mental Illness for resources to support both Emily and other family members, including Mrs. Draper as her parent. This is a particularly good source for resources after high school. Contact information for the local chapter can be found at nami.org/
- Emily might benefit from activities that encourage calm and relaxing experiences. Since she prefers to be organized and structured, a repeated yoga routine, such as through a video, or other guided mindful activities, such as the Stop, Think, Breathe app available for ipad and smart phones. Similar activities are also available through Youtube.

Tiffany Do,
School Psychologist

Robyn Moses, LEP #2108, LPCC #555
Director, Mental Health Services
School Psychologist

**WEST ORANGE COUNTY SELPA
INDIVIDUALIZED EDUCATION PROGRAM (IEP) - INFORMATION / ELIGIBILITY**

Student Name Reed, Emily Date of Birth [REDACTED] IEP Date: 10/22/2014
 Last Annual IEP 10/22/2014 Next Annual IEP 10/22/2015 Original SpEd Entry Date 5/14/2008
 Last Eval 9/20/2013 Next Eval 9/20/2016
 Purpose of Meeting ☐ Initial ☐ Annual ☐ Triennial ☐ Transition ☐ Pre-Expulsion ☐ Interim ☒ Other _____
 Age 17 Gender ☐ Male ☒ Female
 Grade Twelfth grade Migrant ☐ Yes ☒ No Native Language English
 EL ☐ Yes ☒ No Redesignated ☐ Interpreter ☐ Yes ☐ No
 Student ID [REDACTED] SSN#: _____ SSID# 1198242810

Residency _____

Parent/Guardian Alicia Draper
 Home Address [REDACTED]
 City [REDACTED]
 State, Zip [REDACTED]

Home Phone [REDACTED]
 Work Phone [REDACTED]
 Cell Phone [REDACTED]
 Email Address _____

Parent/Guardian Jeffory Reed
 Home Address [REDACTED]
 City [REDACTED]
 State, Zip [REDACTED]

Home Phone _____
 Work Phone _____
 Cell Phone [REDACTED]
 Email Address _____

District of Residence Huntington Beach Union High School DistrictResidence School Huntington Beach HighEthnicity: 501 Non HispanicRace 1. 700 White Race 2. _____ Race 3. _____

INDICATE DISABILITY/IES Note: For initial and triennial IEPs, assessment must be done and discussed by IEP Team before determining eligibility.

Primary Emotional Disturbance (ED) Secondary 200 None * Low Incidence Disability

☐ Not Eligible for Special Education ☐ Exiting from Sp. ED. (returned to reg. ed/no longer eligible)

Describe how student's disability affects involvement and progress in general curriculum (or for preschoolers, participation in appropriate activities) *Emily demonstrates severe internalizing behaviors which negatively impact her functional communication skills and overall participation at school.*

FOR INITIAL PLACEMENTS ONLY

Has the student received IDEA Coordinated Early Intervening Services (CEIS) using 15% of IDEA funding in the past two years?

☒ Yes ☐ No

Date of Initial Referral for Special Education Services

03/14/2008

Person Initiating the Referral for Special Education service

20 Teacher

Date District Received Parent Consent:

04/08/2008**RESP'T APP 0392****ER 001411**

* Date of Initial Meeting to Determine Eligibility

05/14/2008

RESP'T APP 0393

ER 001412

**WEST ORANGE COUNTY SELPA
INDIVIDUAL TRANSITION PLAN (ITP)**

Student Name Reed, Emily

Date of Birth [REDACTED]

IEP Date: 10/22/2014Student Invited: ☒ Yes ☐ NoIf Appropriate, and agreed upon, agencies invited:
☒ Yes ☐ No ☐ N/A

Describe how the student participated in the process:

☒ Present At Meeting☒ Interview Prior☒ Interest Inventories☒ QuestionnaireAge-appropriate transition assessments/instruments were used: ☒ Yes ☐ No

Describe the results of the assessments:

Emily shared that she likes all of her classes at school, and specifically mentioned her interest in sign language. Emily also shared that she likes to run (she is part of the cross country team at HBHS) and likes to organize. Emily also stated that she enjoys doing research. When asked what subject(s) she would like to learn more about she mentioned that she would like to learn more about disabilities in children. When asked what areas she might be interested in terms of employment she mentioned that she might want to work in a capacity where she was helping people and mentioned that she was curious about jobs relating to close captioning communications.

Emily stated that she has obtained a California driver's license. Emily also stated that she might be open to attempting to obtain a part-time job in the future. Upon graduation from high school, Emily shared that she is considering attending a community college to further her education, possibly Golden West College where she would be able to continue her education in the field of sign language.

Emily has participated with WorkAbility and has completed several career oriented surveys. The results of her surveys are as follows:

COIN Career Interest Survey Results (12/14/11):**Identified Career Cluster One: Health Science****Highlighted Careers: Health Information Technician, Home Health Aide,****Identified Career Cluster Two: Hospitality and Tourism****Highlighted Careers: Cook/Chef, Fitness Trainer and Athletic Instructor, Food Services Manager, Health Club Manager, Interpreter and Translator****Identified Career Cluster Three: Agriculture, Food and Natural Resources****Highlighted Careers: Wildlife Biologist, Zoologist****Coastline ROP Career Pathways Survey Results (5/20/13):****Identified Career Pathway One: Health Services****Careers Of Interest: Ambulance Driver, Cosmetology, Nurse, Podiatrist, Allergist, Food Technician****Identified Career Pathway Two: Consumer and Public Services****Careers of Interest: None Indicated****Identified Career Pathway Three: Science and Technology****Careers of Interest: None Indicated****Learning Style Preference Survey Results (10/16/14):****Identified Preferred Learning Style One: Musical and Logical-Mathematical (Scored Equally)****Identified Careers of Interest: Forest Ranger, Ultrasound Technician, Dietician, Food Inspection Specialist****Identified Preferred Learning Style Two: Visual-Spatial and Bodily-Kinesthetic (Scored Equally)****Identified Careers of Interest: None Identified****Myers Briggs Cognitive Style Survey Results (10/6/14): ISFJ (Introverted, Sensing, Feeling and Judging)****ISFJ Nickname: Consverator****RESP'T APP 0394****ER 001413**

<p>Upon completion of school I will attend a junior college close to home</p> <p>Linked to Annual Goal # <u>1, 2, 3, 4</u></p> <p>Person/Agency Responsible: <i>IEP/ITP Team</i></p>	<p>Transition Service Code as Appropriate: <u>330 Specialized Academic Instruction</u> Activities to Support Post Secondary Goal: <i>Emily will:</i> <ul style="list-style-type: none"> - Pass all classes needed to earn a high school diploma - Maintain good attendance - Enroll in community college - Apply for financial aid for education purposes - Apply for student support services at the college she decides to attend - Take the SOAR Community College Entrance Exam - Utilize transition related services offered through WorkAbility, if interested - Attend an orientation session through the community college she decides to attend Community Experiences as Appropriate: <i>Emily will:</i> <ul style="list-style-type: none"> - Investigate local community colleges - Visit local community colleges, if interested Related Services as Appropriate: 840 Career awareness </p>
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<p><i>Upon completion of school I will look for a job in a field of interest after graduating college</i></p> <p>Linked to Annual Goal # <u>1, 2, 3, 4</u></p> <p>Person/Agency Responsible: <i>IEP/ITP Team</i></p>	<p>Transition Service Code as Appropriate:</p> <p>Activities to Support Post Secondary Goal: <i>Emily will:</i> - Considering enrolling for support services offered through the CA Department of Rehabilitation, if interested - Utilize the services offered through WorkAbility at HBHS to obtain part-time employment. if interested</p> <p>Community Experiences as Appropriate: <i>Emily will:</i> -Continue to participate with activities in her church - Continue to run with the Cross Country team at HBHS</p> <p>Related Services as Appropriate:</p>
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<p>Upon completion of school I will <i>Emily will reside at home with her family until ready financially and emotionally to live independently</i></p> <p>Linked to Annual Goal # <u>1, 2, 3, 4</u></p> <p>Person/Agency Responsible: <i>IEP/ITP Team</i></p>	<p>Transition Service Code as Appropriate:</p> <p>Activities to Support Post Secondary Goal: <i>Emily will:</i> <i>-Continue to work on developing her self advocacy skills</i></p> <p>Community Experiences as Appropriate:</p> <p>Related Services as Appropriate:</p>
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**WEST ORANGE COUNTY SELPA
INDIVIDUAL TRANSITION PLAN (ITP)**

Name Reed, EmilyDate of Birth [REDACTED]IEP Date: 10/22/2014**District Graduation Requirements:****Course of Study**

A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their post secondary goal. ☒ Yes ☐ No

Pre-Employment Training will be deferred to senior year as per family request due to Emily's general education schedule.

Units/Credits Completed: 191Units/Credits Pending: 29

Student's course of study leads to:

Anticipated Completion Date: 06/19/2015(Select one option below) ☐ Certificate of Completion ☒ Diploma**CAHSEE (High School Exit Exam)**☒ CAHSEE/ELA date: 03/12/2013Score: 390☒ Passed☐ Did not pass☐ CAHSEE/Math date: 03/13/2013Score: 410☒ Passed☐ Did not pass☐ CAHSEE Other: _____**Age of Majority:**☒ On or before the student's 17th birthday, he/she has been advised of rights at age of majority (age 18)By whom: R. RoismanDate: 09/21/2012

When you reach the age of 18, the age of majority, you have the right to receive all information about your educational program and make all decisions related to your education. This includes the right to represent yourself at an IEP meeting and sign the IEP in place of your parent or guardian.

Is there an appropriate measurable post secondary goal(s) that covers education or training, employment and, as needed, independent living? ☒ Yes ☐ No

Is the Post secondary goal(s) addressed/updated in conjunction with the development of the Annual IEP? ☒ Yes ☐ No

Are there transition services included in the IEP that will reasonably enable the student to meet his or her post secondary goals? ☒ Yes ☐ No

Are there annual goal(s) included in the IEP that are related to the student's transition services needs? ☒ Yes ☐ No

RESP'T APP 0396

ER 001415

**WEST ORANGE COUNTY SELPA
PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE**

Student Name Reed, EmilyDate of Birth [REDACTED]IEP Date: 10/22/2014**Strengths/Preferences/Interests**

Emily is a quiet girl who completes her assignments and prefers to work independently. Emily is polite, punctual, and attentive in her classes. She works incredibly hard and earns A grades in almost every class. Emily does prefer a smaller, quiet environment for tests. Emily enjoys cooking, her church, origami and other types of arts and crafts. She participates on both the cross country team and the track team and has throughout high school.

Concerns of parent relevant to educational progress**SBAC (Scores not available from 2014)**English/Language Arts ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below BasicMath ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below Basic**CA Standards Test****Science**☐ Adv. ☒ Proficient ☐ Basic ☐ Below Basic ☐ Far Below Basic**CMA**Science ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below Basic**CAPA**English/Language Arts ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below BasicMath ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below BasicScience ☐ Adv. ☐ Proficient ☐ Basic ☐ Below Basic ☐ Far Below Basic**CELDT**

Listening _____

Speaking _____

Reading _____

Writing _____

Physical Education Testing (grades 5, 7 & 9):

Other Assessment Data (e.g., curriculum assessment, other district assessment, etc.)Hearing Date: (9/17/2013) ☐ Pass ☒ Fail ☐ Other _Vision Date: (9/17/2013) ☒ Pass ☐ Fail ☐ Other _**Precademic/Academic/Functional Skills**

RESP'T APP 0397

ER 001416

English-Reading Comprehension and Writing. On the STAR Assessment given 5/1/12, Emily scored within the Basic range in English Language Arts with a scaled score of 325. Her Math score was 360 placing her in the Proficient range. On the Reading Honors Placement Test, her Comprehension was a grade equivalent of 8.9 (within grade level), Vocabulary was a grade equivalent of 10.0 (above grade level) and Reading was a grade equivalent of 9.2 which is right a grade level. Emily functions exceedingly well in all her general education classes. She is compulsive about studying and completing homework and classwork often spending hours at home completing assignments. Reading Comprehension is a unique need.

Communication Development

Gross/Fine Motor Development

Social Emotional/Behavioral

Emily needs to improve self-advocacy skills especially when it is necessary to ask a question for clarification and/or directions. Emily also struggles with regulating her emotions. At least twice a week, Emily experiences anxiety or panic attacks. She requires assistance from the school psychologist to take control of her thoughts and feelings. Furthermore, when Emily feels overwhelmed, she has great difficulty making decisions and would prefer others to decide for her.

Vocational

pre-employment training postponed due to enrollment in all general education classes.

Adaptive/Daily Living Skills

Health

Hearing loss. Audiology report indicates inconsistent response throughout the audiogram. Audiologist wrote suggests a functional component to the hearing test results. Also discrim results in right ear inconsistent with hearing loss patient is indication during testing.

For student to receive educational benefit, goals will be written to address the following areas of need:
self advocacy, passage comprehension

**WEST ORANGE COUNTY SELPA
SPECIAL FACTORS**Student Name Reed, Emily

Date of Birth [REDACTED]

IEP Date: 10/22/2014Does the student require assistive technology devices and/or services? ☐ No ☒ Yes**Rationale***Emily uses an FM amplification device to assist with processing information*Does the student require low incidence services, equipment and/or materials to meet educational goals? ☐ No ☒ Yes
(if yes, specify)Considerations if the student is blind or visually impaired: *No*Considerations if the student is deaf or hard of hearing: *Yes*

If the student is an English Learner, complete the following section:

Does the student need primary language support? ☒ No ☐ Yes if yes, who will provide? _____

What will be the language of instruction for the student? _____

Who will provide ELD services to student? ☐ General Education ☐ Special EducationWhat type of ELD services will be provided? ☐ English Language Mainstream ☐ Structured English Immersion
☐ Alternative Program (primary language instruction)

Comments:

Does student's behavior impede learning of self or others? ☒ No ☐ Yes

If yes, specify positive behavior interventions, strategies, and supports

☐ Behavior Goal is part of this IEP ☐ Behavior Intervention Plan (BIP) attached**RESP'T APP 0399****ER 001418**

**WEST ORANGE COUNTY SELPA
Statewide Assessments**

Student Name: Emily ReedDate of Birth: [REDACTED]IEP Date: 10/22/2014

Indicate student's participation in the California Assessment of Student Performance and Progress (CAASPP) below:
English Language Arts (Grades 3-8, & 11)

- ☒ Out of testing range
☐ SBAC without Designated Supports or Accommodations
☐ SBAC with Designated Supports Embedded
☐ SBAC with Designated Supports Non-embedded
☐ SBAC with Accommodations Embedded
☐ SBAC with Accommodations Non-embedded
☐ SBAC with Accessibility Support (requires CDE Approval)
☐ Alternate Assessment

Math (Grades 3-8, & 11)

- ☒ Out of testing range
☐ SBAC without Designated Supports or Accommodations
☐ SBAC with Designated Supports Embedded
☐ SBAC with Designated Supports Non-embedded
☐ SBAC with Accommodations Embedded
☐ SBAC with Accommodations Non-embedded
☐ SBAC with Accessibility Support (requires CDE Approval)
☐ Alternate Assessment

Science (Grades 5, 8 & 10)

- ☒ Out of testing range
☐ CST without Designated Supports or Accommodations
☐ CST with Designated Supports
☐ CST with Accommodations
☐ CMA without Designated Supports or Accommodations
☐ CMA with Designated Supports
☐ CMA with Accommodations
☐ CAPA Level ☐ 1. ☐ 2. ☐ 3. ☐ 4. ☐ 5.

☐ If student is taking CMA, CAPA, or Alternate Assessment the IEP team has reviewed the criteria for taking alternate assessments.

The student will not participate in the SBAC because
 Participation in an Alternate Assessment is appropriate

Physical Fitness Test (Grades 5, 7 & 9)

- ☒ Out of testing range
☐ Without Accommodations
☐ With Accommodations
☐ With Modifications (Check with PFT Office prior to use)

CAHSEE (Grades 10-12, or ages 15+ and grade code is 'Ungraded')

- ☒ Outside of testing range

RESP'T APP 0400**ER 001419**

- ☐ Without Accommodations
- ☐ With Accommodations
- ☐ CAHSEE with Modifications (waiver required)
- ☐ Exemption/ Medical Exemption
- ☐ To participate in Alternate Assessment

☐ Other State-Wide/ District-Wide Assessment(s) Alternate Assessment(s) 0

☐ Desired Results Developmental Profile (DRDP) – (Preschoolers Ages 3, 4 and 5 years)

- | | | |
|--|---|---|
| <input type="checkbox"/> Not Applicable | <input type="checkbox"/> Sensory support | <input type="checkbox"/> Functional positioning |
| <input type="checkbox"/> Alternative response mode | <input type="checkbox"/> Assistive equipment or device | <input type="checkbox"/> Visual support |
| <input type="checkbox"/> Alternative mode for written language | <input type="checkbox"/> Augmentative or alternative communication system | |

☐ CELDT (English Learners Only)

- ☐ Listening without Accommodations
- ☐ Listening with Accommodations

- ☐ Speaking without Accommodations
- ☐ Speaking with Accommodations

- ☐ Reading without Accommodations
- ☐ Reading with Accommodations

- ☐ Writing without Accommodations
- ☐ Writing with Accommodations

☐ Alternate Assessment to CELDT

If yes, areas of alternate assessment: ☐ Listening ☐ Speaking ☐ Reading ☐ Writing

Name of alternate assessment(s)

Person responsible to administer alternate assessment(s)

☐ Standards based Tests in Spanish STS

- ☐ Math without Accommodations
- ☐ Math with Accommodations
- ☐ Reading, Language, Spelling without Accommodations
- ☐ Reading, Language, Spelling with Accommodations

**WEST ORANGE COUNTY SELPA
ANNUAL GOALS AND OBJECTIVES**

Student Name Reed, Emily

Date of Birth [REDACTED]

IEP Date: 10/22/2014

Area of Need: Social Emotional	Measurable Annual Goal# <u>3</u>
Baseline: <i>Emily is seeing her therapist two times per week. She is making some progress with therapy. Emily also sees the school psychologist at least twice a week for counseling and guidance. She experiences flashback and anxiety attacks that cause her setbacks and interrupts her day and class time. Emily is emotionally fragile.</i>	<p><i>Goal: By 10/22/2015, when feeling overwhelmed or emotionally upset, Emily will seek the support of the school psychologist or case manager, discuss her feelings, and identify at least one appropriate action or solution to reduce the emotional upset as measured by data collected by staff.</i></p> <p><input checked="" type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard _____</p> <p><input type="checkbox"/> Addresses other educational needs resulting from the disability</p> <p><input type="checkbox"/> Linguistically appropriate</p> <p><input type="checkbox"/> Transition</p> <p>Goal: <input checked="" type="checkbox"/> Education/Training <input checked="" type="checkbox"/> Employment <input checked="" type="checkbox"/> Independent Living</p> <p>Person(s) Responsible <u>Student & IEP Team</u></p>

Progress Report 1: _____

Summary of Progress

Comment

Progress Report 2: 1/31/2014

Summary of Progress

Comment

Progress Report 3: 4/30/2014

Summary of Progress

Comment

Annual Review Date: 6/13/2014Goal Met ☐ Yes ☐ No Comments:

RESP'T APP 0402

ER 001421

**WEST ORANGE COUNTY SELPA
ANNUAL GOALS AND OBJECTIVES**

Student Name Reed, Emily

Date of Birth [REDACTED]

IEP Date: 10/22/2014

Area of Need: self advocacy

Measurable Annual Goal# 2

Baseline: *Emily had been improving in this area and then had a set-back. She is determined to assert her rights this year and has a very positive attitude about it. She currently performs this skill with 70% accuracy.*

Goal: *By 10/22/2015, Emily will assert her right to her learning accommodations with 100% accuracy as measured by teacher observation and reports.*

☒ Enables student to be involved/progress in general curriculum/state standard _____

☐ Addresses other educational needs resulting from the disability

☐ Linguistically appropriate

☒ Transition

Goal: ☒ Education/Training ☒ Employment ☒ Independent Living
Person(s) Responsible Special Education Teacher

Progress Report 1: _____

Summary of Progress

Comment

Progress Report 2: _____

Summary of Progress

Comment

Progress Report 3: _____

Summary of Progress

Comment

Annual Review Date: _____

Goal Met ☐ Yes ☐ No Comments:

RESP'T APP 0403

ER 001422

**WEST ORANGE COUNTY SELPA
ANNUAL GOALS AND OBJECTIVES**

Student Name Reed, EmilyDate of Birth [REDACTED]IEP Date: 10/22/2014

Area of Need: Reading Comprehension 9-10.3.3 Baseline: <i>Emily has maintained A grades in gen. ed English for the majority of her time at HBHS. She is very focused and diligent about schoolwork. Emily currently performs this skill with 80% accuracy.</i>	Measurable Annual Goal# <u>3</u> <i>Goal: (Annual Goal) By 10/22/2015, when given grade level literary text, Emily will analyze interactions between characters and explain how they affect the plot by verbally summarizing character's motivation, relationships, influences and conflicts with _95% accuracy as measured by teacher observation.</i> <input checked="" type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard <u>9-10.3</u> <input type="checkbox"/> Addresses other educational needs resulting from the disability <input type="checkbox"/> Linguistically appropriate <input checked="" type="checkbox"/> Transition Goal: <input checked="" type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Person(s) Responsible <u>Special Education Teacher</u>
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Progress Report 1: _____

Summary of Progress

Comment

Progress Report 2: _____

Summary of Progress

Comment

Progress Report 3: _____

Summary of Progress

Comment

Annual Review Date: _____

Goal Met ☐ Yes ☐ No Comments:

RESP'T APP 0404

ER 001423

**WEST ORANGE COUNTY SELPA
ANNUAL GOALS AND OBJECTIVES**

Student Name Reed, EmilyDate of Birth IEP Date: 10/22/2014

Area of Need: Task Completion

Measurable Annual Goal# 4

Baseline: Emily is on target to graduate in June, 2015 if she maintains her current schedule of classes. She dropped several classes last spring due to personal reasons but was able to make up the work through the adult education program during the summer. Currently, Emily has completed 191 credits and needs only 29 additional credits to graduate.

Goal: By June 18, 2015, Emily will have completed all the requirements to graduate with a diploma as measured by transcripts.

☒ Enables student to be involved/progress in general curriculum/state standard _____

☐ Addresses other educational needs resulting from the disability

☐ Linguistically appropriate

☒ Transition

Goal: ☒ Education/Training ☐ Employment ☐ Independent Living

Person(s) Responsible Special Education Teacher

Progress Report 1: _____

Summary of Progress

Comment

Progress Report 2: _____

Summary of Progress

Comment

Progress Report 3: _____

Summary of Progress

Comment

Annual Review Date: _____

Goal Met ☐ Yes ☐ No Comments:

RESP'T APP 0405

ER 001424

WEST ORANGE COUNTY SELPA
Offer of FAPE - SERVICES

Student Name Reed, Emily

Birthdate [REDACTED]

IEP Date: 10/22/2014

The Service Options that were considered by the IEP team (In selecting LRE, describe the consideration is given to any potential harmful effect on the child or on the quality of services that he or she needs): *General Education, Specialized Academic Instruction outside General Education*

Supplementary Aids, Services & Other Supports for school personnel, or for student, or on behalf of the student

Aids, Services, Program Accommodations/Modifications, and/or Supports		Start Date	End Date	Frequency	Duration	Location
extra time on assignments, tests and quizzes not to exceed double assigned time, may take tests in special ed. classroom if desired, may have preferential seating if desired, variable credits, may leave classroom if needed to visit school psychologist or case manager to assist with emotional needs, monitor FM device	<input checked="" type="checkbox"/> Student	09/18/2014	09/18/2015	all general education	1 school year	HBHS general education classes
	<input type="checkbox"/> Personnel					
	<input type="checkbox"/> Student			Daily	1 school year	HBHS classrooms
	<input checked="" type="checkbox"/> Personnel	10/22/2014	10/22/2015			

Special Education Transportation ☒ No ☐ Yes

SPECIAL EDUCATION and RELATED SERVICES

Service: Specialized Academic Instruction	Start Date: 10/22/2014	End Date: 10/22/2015
Provider: District of Service	<input type="checkbox"/> Ind <input checked="" type="checkbox"/> Grp <input type="checkbox"/> Sec Transition	
Duration/Freq: 50 min x 1 Totaling: 50 min served Daily	Location: Separate classroom in public integrated facility	
Comments: Physical Science		
Service: Counseling and guidance	Start Date: 10/22/2014	End Date: 10/22/2015
Provider: District of Service	<input checked="" type="checkbox"/> Ind <input type="checkbox"/> Grp <input type="checkbox"/> Sec Transition	
Duration/Freq: 30 min x 2 Totaling: 60 min served Weekly	Location: Separate classroom in public integrated facility	
Comments:		
Service: Individual counseling	Start Date: 10/22/2014	End Date: 10/22/2015
Provider: District of Service	<input checked="" type="checkbox"/> Ind <input type="checkbox"/> Grp <input type="checkbox"/> Sec Transition	
Duration/Freq: 45 min x 3 Totaling: 135 min served Monthly	Location: Separate classroom in public integrated facility	
Comments: Educationally Related Mental Health Services provided by Compass Center staff		
Service: Parent counseling	Start Date: 10/22/2014	End Date: 10/22/2015
Provider: District of Service	<input type="checkbox"/> Ind <input checked="" type="checkbox"/> Grp <input type="checkbox"/> Sec Transition	
Duration/Freq: 45 min x 3 Totaling: 135 min served Monthly	Location: Service provider location	

RESP' APP 0406

ER 001425

Comments: Educationally Related Mental Health Services at Compass Center

Service: Career awareness

Start Date: 10/22/2014 End Date: 6/19/2015

Provider: District of Service

☐ Ind ☒ Grp ☐ Sec Transition

Duration/Freq: 50 min x 1 Totalling: 50 min served Yearly

Location: Regular classroom/public day school

Comments: senior services, may be individual depending on student's academic schedule/needs

EXTENDED SCHOOL YEAR (ESY)

☐ Yes ☒ No

Rationale: *Emily is anticipated to graduate prior to ESY.*

Programs and services will be provided according to when student is in attendance and consistent with the district of service calendar and scheduled services, excluding holidays, vacations, and non-instructional days unless otherwise specified.

RESP'T APP 0407

ER 001426

WEST ORANGE COUNTY SELPA
Offer of FAPE - EDUCATIONAL SETTING

Student Name Reed, Emily

Date of Birth

IEP Date: 10/22/2014Physical Education ☒ General
Cross Country teams☐ Specially Designed☐ Otherparticipates on both the Track andDistrict of Service Huntington Beach Union High
School DistrictSchool of Attendance Huntington Beach School Type Public day
High schoolFederal Setting Regular classroom/Public day school

Federal Preschool Setting _____

All special education services provided at student's school of residence?

☒ Yes ☐ No (rationale)17 % of time student is outside the regular class & extracurricular & non academic activities83 % of time student is in the regular class & extracurricular & non academic activitiesStudent will not participate in the regular class & extracurricular & non academic activities _____
because emotional needs

Other Agency Services

☐ California Children's Services(CCS)☐ Probation☐ Dept. of Social Services(DSS)☐ Other _____☐ Regional Center☐ Department of Rehabilitation☐ County Mental Health (CMH)

Promotion Criteria:

☒ District ☐ Progress on Goals ☐ Other _____

Parents will be informed of progress

☒ Quarterly ☐ Trimester ☐ Semester ☐ Other _____

How?

☒ Progress Summary Report ☐ Other _____**ACTIVITIES TO SUPPORT TRANSITION** (e.g. preschool to kindergarten, special education and/or NPS to general education class, 8th-9th grade, etc)**GRADUATION PLAN** (Grade 7 and Higher)Projected graduation date and/or secondary completion date 06/18/2015☒ 10 To participate in high school curriculum leading to a diploma☐ 20 To participate in high school curriculum leading to certificate of completion or other than diploma

RESP'T APP 0408

ER 001427

WEST ORANGE COUNTY SELPA SIGNATURE AND PARENT CONSENT

Student Name Reed, EmilyDate of Birth [REDACTED]IEP Date 10/22/2014

IEP Meeting Participants

Alicia Draper
Parent/Guardian/Surrogate

10-22-14
Date

[Signature]
Parent/Guardian

10-22-14
Date

[Signature]
Student/Adult Student

10/22/14
Date

[Signature]
General Education Teacher

10/22/14
Date

[Signature]
LEA Representative/Admin. Designee

10/22/14
Date

[Signature]
Special Education Specialist

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

[Signature]
Additional Participant/Title

10/22/14
Date

CONSENT

- ☐ I agree to all parts of the IEP.
☒ I agree with the IEP, with the exception of individual and parent counseling.
☐ I decline the offer of initiation of special education services.
☐ I understand that my child is not eligible for special education.
☐ I understand that my child is no longer eligible for special education.

As a means of improving services and results for your child did the school facilitate parent involvement?

☒ Yes ☐ No ☐ No Response

Signature below is to authorize and approve the IEP.

Signature Alicia Draper
☒ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

Date 10-22-14

Signature _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

Date _____

If my child is or may become eligible for public benefits (Medi-Cal): I authorize the LEA/district to release student information for the limited purpose of billing Medi-Cal/Medicaid and to access Medi-Cal: health insurance benefits for applicable services.

Signature _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

- ☐ Parent/Adult Student has received a copy of the Procedural Safeguards
☐ Parent/Adult Student has received a copy of assessment report (if applicable)
☐ Parent/Adult Student has received a copy of the Individualized Education Plan (IEP)
☐ Parent/Adult Student has received written notification of protections available to parents when LEA requests to access Medi-cal benefits
☐ Student enrolled in private school by their parents. Refer to Individual Service Plan, if appropriate.

RESP'T APP 0409

ER 001428

**WEST ORANGE COUNTY SELPA
IEP TEAM MEETING NOTES**

Student Name: Reed, Emily

Birthdate: [REDACTED]

IEP Date: 10/22/2014

Date:

Notes:

RESP'T APP 0410

ER 001429

**WEST ORANGE COUNTY SELPA
IEP TEAM MEETING NOTES**

Student Name: Reed, Emily

Birthdate: [REDACTED]

IEP Date: 10/22/2014

Date: 3/14/2014

Notes:

RESP'T APP 0411

ER 001430

**WEST ORANGE COUNTY SELPA
IEP TEAM MEETING NOTES****Student Name:** Reed, Emily**Birthdate:** [REDACTED]**IEP Date:** 10/22/2014**Date:** 10/22/2014**Notes:** *Team reviewed and considered recent evaluation.*

Recommendation for individual and parent counseling was developed with knowledge that Emily presently receives private services. Should parent elect to decline district's services in this area at this time in order to continue with current provider, due to parental preference, team agrees this will still allow her to receive a FAPE. IEP will continue to include these offered services should parent elect to consent to them at a later time, unless IEP team determines they are no longer appropriate in a subsequent meeting.

RESP'T APP 0412**ER 001431**

WEST ORANGE COUNTY SELPA
IEP Amendment(s) / Addendum PageStudent Name Emily Reed

Date of Birth [REDACTED]

Date: April 3, 2015Purpose of Meeting
review placementChanges to the IEP dated 10/22/2014(Initial) ER I agree to the contents of the amendment to the IEP dated 10/22/2014Alexa Draper
Parent/Guardian/Surrogate/Adult Student4-3-15
DateEmily Reed
Student/Adult Student4/3/15
DateJohn McMan
LEA Rep./Admin. Designee4/3/15
DateLaDonna School Psych
Additional Participant/Title4/3/15
DateRuby Moses, Dir. RTH
Additional Participant/Title4/3/15
DateAD
Parent4.3.15
DateMEG
General Education Teacher4/3/15
DateMeghan Chan
Special Education Specialist4/3/15
DateElizabeth Olden / Miranda
Additional Participant/Title4/3/15
Date

RESP'T APP 0413

ER 001432

IEP Amendment(s) / Addendum Page

Student Name Emily Reed

Date of Birth [REDACTED]

Date: May 18, 2015

Purpose of Meeting
Discuss Emily's present levels.

Changes to the IEP dated 10/22/2014

Emily has worked very hard at school. She is starting an intensive medical program and will not be able to attend school. The IEP team recommended home teaching to help pEmily finish her last credits she needs to earn to graduate high school.

(Initial) EK I agree to the contents of the amendment to the IEP dated 10/22/2014

Emily Reed
Parent/Guardian/Surrogate/Adult Student

5/18/15
Date

Student/Adult Student
Megan Chan
LEA Rep./ Admin. Designee

Date
5/18/15
Date

Parent
Keith Chambers
General Education Teacher
GTS
Special Education Specialist

Date
5/18/15
Date
5/18/15
Date

Additional Participant/Title

Date

Additional Participant/Title

Date

Additional Participant/Title

Date

Additional Participant/Title

Date

RESP'T APP 0414

ER 001433



Huntington Beach High School

1905 Main Street, Huntington Beach, CA 92648 (714) 536-2514 FAX (714) 960-7042


May 17, 2019

To whom it may concern:

My name is Rigo Torres, Registrar at Huntington Beach High School. Per your request, a copy of the available cumulative record has been included with this letter.

For any further questions, please do not hesitate in contacting Rigo Torres (Registrar) at: 714-536-2514 Ext. 4431.

Email: rtorres@hbuhsd.edu



Rigo Torres - Registrar

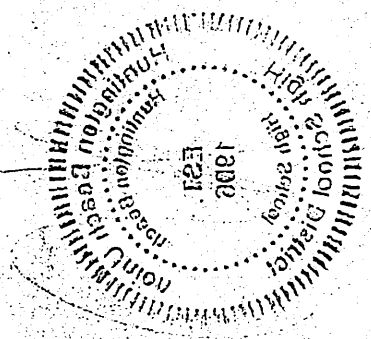
RESP'T APP 0415

Huntington Beach Union High School District

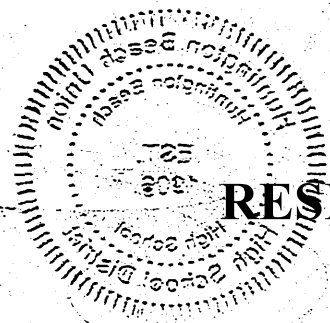
ER 001434

RESP'T APP 0416

ER 001435



Student Name Reed, Emily C.		Student ID [REDACTED]	Grade 12	Gender Female	Birthdate [REDACTED]	Birthplace US	Academic Transcript																																																												
Parent/guardian name, address, telephone Mrs Alicia Reed [REDACTED]							May 17, 2019 Huntington Beach UHSD 5832 Bolsa Ave. Huntington Beach, CA 92649 (714) 903-7000																																																												
Crs-ID	Course Title	Mark	Att/Cmp	Crs-ID	Course Title	Mark	Att/Cmp	Crs-ID	Course Title	Mark	Att/Cmp																																																								
Grade 9 Fall 2011-2012				Grade 12 Summer 2013-2014				Grade 12 Summer 2013-2014																																																											
Huntington Beach High (Huntington Bch, CA)				Huntington Beach High (Huntington Bch, CA)				Huntington Beach Adult (Huntington Bch, CA)																																																											
p 01C	CP English 1A	A	5.00 5.00	p 21J	Algebra 1B	A	5.00 5.00	p 12F	US History B	B	3.00 3.00																																																								
p 27A	Life Science A	A	5.00 5.00	p 27L	Biology B	B	5.00 5.00	Credit Att: 3.00 Cmp: 3.00 TGPA: 3.00																																																											
50M	New Media	A	5.00 5.00	* 41I	Amer Sgn Lng1	A	5.00 5.00	Grade 12 Fall 2014-2015																																																											
54C	Dev Reading I	A	5.00 5.00	* 99E	Ath:Track	A	2.50 2.50	Huntington Beach High (Huntington Bch, CA)																																																											
72M	Essentials AlgA	A	5.00 5.00	* 99K	Ath:Cross Ctry	A	2.50 2.50	p 05N	Lit Mod Med A	A	5.00 5.00																																																								
* 97A	PE 1	A	2.50 2.50	Credit Att: 30.00 Cmp: 30.00 TGPA: 3.83			p 14E	Economics	A	5.00 5.00																																																									
* 97A	PE 1	A	2.50 2.50	Grade 11 Fall 2013-2014				24G	Con Math A	A	5.00 5.00																																																								
Credit Att: 30.00 Cmp: 30.00 TGPA: 4.00				Huntington Beach High (Huntington Bch, CA)				p 41K	Amer Sgn Lng3	A	5.00 5.00																																																								
Grade 9 Spring 2011-2012				p 03E	CP English 3A	A	5.00 5.00	64T	Phy Sci X	A	5.00 5.00																																																								
Huntington Beach High (Huntington Bch, CA)				p 12E	US History A	B	5.00 5.00	* 99K	Ath:Cross Ctry	A	2.50 2.50																																																								
p 01D	CP English 1B	A	5.00 5.00	p 22A	Geom A	A	5.00 5.00	* 99K	Ath:Cross Ctry	A	2.50 2.50																																																								
p 27B	Life Science B	A	5.00 5.00	p 26I	Chemistry A	C	5.00 5.00	Credit Att: 30.00 Cmp: 30.00 TGPA: 4.00																																																											
29Q	Health	A	5.00 5.00	p 41J	Amer Sgn Lng2	A	5.00 5.00	Grade 12 Spring 2014-2015																																																											
54C	Dev Reading I	A	5.00 5.00	* 99E	Ath:Track	A	2.50 2.50	Huntington Beach High (Huntington Bch, CA)																																																											
72N	Essentials AlgB	A	5.00 5.00	* 99K	Ath:Cross Ctry	A	2.50 2.50	73J	US Govt SD	A	5.00 5.00																																																								
* 97A	PE 1	A	2.50 2.50	Credit Att: 30.00 Cmp: 30.00 TGPA: 3.50			83O	Floral Des ROP	C	2.50 2.50																																																									
* 97A	PE 1	A	2.50 2.50	Grade 11 Spring 2013-2014				* 88C	Aide: Classrm	CR	2.50 2.50																																																								
Credit Att: 30.00 Cmp: 30.00 TGPA: 4.00				Huntington Beach High (Huntington Bch, CA)				Credit Att: 10.00 Cmp: 10.00 TGPA: 3.33																																																											
Grade 10 Fall 2012-2013				p 03F	CP English 3B	A	5.00 2.50																																																												
Huntington Beach High (Huntington Bch, CA)				p 12F	US History B	B	5.00 2.50																																																												
p 02C	CP English 2A	A	5.00 5.00	p 22B	Geom B	B	5.00 2.50																																																												
p 10A	W History A	A	5.00 5.00	p 26J	Chemistry B	B	5.00 2.50																																																												
p 21I	Algebra 1A	A	5.00 5.00	p 41J	Amer Sgn Lng2	A	5.00 5.00																																																												
p 27K	Biology A	A	5.00 5.00	64C	Eng 3 X	A	2.50 2.50																																																												
p 41I	Amer Sgn Lng1	A	5.00 5.00	64C	Eng 3 X	C	5.00 5.00																																																												
* 99E	Ath:Track	A	2.50 2.50	64V	Study Skills X	CR	2.50 2.50																																																												
* 99K	Ath:Cross Ctry	A	2.50 2.50	* 99E	Ath:Track	A	2.50 2.50																																																												
Credit Att: 30.00 Cmp: 30.00 TGPA: 4.00				* 99E	Ath:Track	A	2.50 2.50																																																												
Grade 10 Spring 2012-2013				Credit Att: 40.00 Cmp: 30.00 TGPA: 3.33																																																															
Huntington Beach High (Huntington Bch, CA)				Grade 11 Summer 2013-2014																																																															
p 02D	CP English 2B	A	5.00 5.00	Marina High School (Huntington Beach, CA)																																																															
p 10B	W History B	A	5.00 5.00	* 89D	Aide: Spec Ed	A	4.00 4.00																																																												
Credit Att: 8.00 Cmp: 8.00 TGPA: 4.00				* 89D	Aide: Spec Ed	A	4.00 4.00																																																												
Course Tags: * = Non Academic + = Honors (weighted) p = College Prep r = Repeated				Credit Att: 8.00 Cmp: 8.00 TGPA: 4.00																																																															
Weighted Non-Wgtd Acad GPA (9-12) 3.73 3.73 Acad GPA (10-12) 3.63 3.63 Total GPA (9-12) 3.78 3.78 Class Size: 658 Class Rank: 185 Ranked by Weighted Total GPA				CREDIT SUMMARY <table border="1"> <thead> <tr> <th>Subject Area</th> <th>Credit Req'd</th> <th>Compl</th> <th>Needed</th> </tr> </thead> <tbody> <tr><td>English</td><td>40.00</td><td>40.00</td><td>-</td></tr> <tr><td>World History</td><td>10.00</td><td>10.00</td><td>-</td></tr> <tr><td>US History</td><td>10.00</td><td>10.00</td><td>-</td></tr> <tr><td>US Government(Jr/Sr)</td><td>5.00</td><td>5.00</td><td>-</td></tr> <tr><td>Economics(Jr/Sr)</td><td>5.00</td><td>5.00</td><td>-</td></tr> <tr><td>Mathematics</td><td>30.00</td><td>30.00</td><td>-</td></tr> <tr><td>Life Science</td><td>10.00</td><td>10.00</td><td>-</td></tr> <tr><td>Physical Science</td><td>10.00</td><td>10.00</td><td>-</td></tr> <tr><td>Health Science</td><td>5.00</td><td>5.00</td><td>-</td></tr> <tr><td>Physical Education</td><td>20.00</td><td>20.00</td><td>-</td></tr> <tr><td>VPArts/WorldLang/CTE</td><td>10.00</td><td>10.00</td><td>-</td></tr> <tr><td>Electives</td><td>65.00</td><td>76.00</td><td>-</td></tr> <tr><td>* TOTALS *</td><td>220.00</td><td>231.00</td><td>-</td></tr> </tbody> </table> Algebra 1 Requirement Met				Subject Area	Credit Req'd	Compl	Needed	English	40.00	40.00	-	World History	10.00	10.00	-	US History	10.00	10.00	-	US Government(Jr/Sr)	5.00	5.00	-	Economics(Jr/Sr)	5.00	5.00	-	Mathematics	30.00	30.00	-	Life Science	10.00	10.00	-	Physical Science	10.00	10.00	-	Health Science	5.00	5.00	-	Physical Education	20.00	20.00	-	VPArts/WorldLang/CTE	10.00	10.00	-	Electives	65.00	76.00	-	* TOTALS *	220.00	231.00	-	Graduated High School: 6/11/2015 State ID# 1198242810			
Subject Area	Credit Req'd	Compl	Needed																																																																
English	40.00	40.00	-																																																																
World History	10.00	10.00	-																																																																
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Electives	65.00	76.00	-																																																																
* TOTALS *	220.00	231.00	-																																																																
Signature: _____ Date: MAY 17 2019 ER 001436				RESP'T APP 0417																																																															



RESP'T APP 0418

ER 001437

Huntington Beach UHSD

5/17/2019

2016-2017

Student Test Scores

Page 1

Student ID		Last Name		First Name	Middle Name	Gender	Grade	Birthdate										
		Reed		Emily	C	Female	12											
TEST ID	Part Grade No.	Grade level	Testing date	Test description	Raw score	Scale score	Grade equiv	Pct ile	Sta nine	Crv eqv	Oth	%	Perf Lvl	Rubric	Test Adm.	Type	Source	
CST	0	10.0	05/11/2013	Calif Standards Test	0	0	0.0	0	0	0.0	0	0	0	0	0	SPRG13		
	1	10.0	05/11/2013	Engl/Lang Arts Total	50	342	0.0	0	0	0.0	0	0	3	0	0	SPRG13		
	3	10.0	05/11/2013	Science	45	376	0.0	0	0	0.0	0	0	4	0	0	SPRG13		
	10	10.0	05/11/2013	World History	40	348	0.0	0	0	0.0	0	0	3	0	0	SPRG13		
	23	10.0	05/11/2013	Algebra I	51	423	0.0	0	0	0.0	0	0	4	0	0	SPRG13		
	42	10.0	05/11/2013	Biology	41	360	0.0	0	0	0.0	0	0	4	0	0	SPRG13		
	0	10.0	03/13/2013	CA High School Exit Exam	0	0	0.0	0	0	0.0	0	0	0	0	0			
	1	10.0	03/13/2013	Math- Total	*Passed*	410	0.0	0	0	0.0	0	0	0	0	0			
	2	10.0	03/13/2013	Math- Prob & Stat	11	0	0.0	0	0	0.0	0	0	85	0	0			
	3	10.0	03/13/2013	Math- Number Sense	16	0	0.0	0	0	0.0	0	0	94	0	0			
CAHSEE	4	10.0	03/13/2013	Math- Algebra/Functions	18	0	0.0	0	0	0.0	0	0	90	0	0			
	5	10.0	03/13/2013	Math- Measurement/Geom	13	0	0.0	0	0	0.0	0	0	72	0	0			
	6	10.0	03/13/2013	Math- Algebra 1	11	0	0.0	0	0	0.0	0	0	92	0	0			
	0	10.0	03/12/2013	CA High School Exit Exam	0	0	0.0	0	0	0.0	0	0	0	0	0			
	21	10.0	03/12/2013	ELA- Total	*Passed*	390	0.0	0	0	0.0	0	0	0	0	0			
	22	10.0	03/12/2013	ELA Reading- Word Anal.	6	0	0.0	0	0	0.0	0	0	86	0	0			
	23	10.0	03/12/2013	ELA Reading- Comp	14	0	0.0	0	0	0.0	0	0	78	0	0			
	24	10.0	03/12/2013	ELA Reading- Lit R & A	19	0	0.0	0	0	0.0	0	0	95	0	0			
	25	10.0	03/12/2013	ELA Writing- Strategies	9	0	0.0	0	0	0.0	0	0	75	0	0			
	26	10.0	03/12/2013	ELA Writing- Conventions	12	0	0.0	0	0	0.0	0	0	80	0	0			
PLCMNT	27	10.0	03/12/2013	ELA Writing Apps- Essay1	0	25	0.0	0	0	0.0	0	0	0	0	0			
	0	9.0	05/25/2012	Placement Tests	0	0	0.0	0	0	0.0	0	0	0	0	0			
	31	9.0	05/25/2012	Reading Comprehension PI	33	0	8.9	0	0	0.0	0	0	0	0	0			
	32	9.0	05/25/2012	Reading Vocabulary PI	30	0	10.0	0	0	0.0	0	0	0	0	0			
	35	9.0	05/25/2012	Reading PI	63	0	9.2	0	0	0.0	0	0	0	0	0			
CST	0	9.0	05/01/2012	Calif Standards Test	0	0	0.0	0	0	0.0	0	0	0	0	0	SPRG12		
	1	9.0	05/01/2012	Engl/Lang Arts Total	40	325	0.0	0	0	0.0	0	0	3	0	0	SPRG12		
	21	9.0	05/01/2012	General Math	44	360	0.0	0	0	0.0	0	0	4	0	0	SPRG12		
	42	9.0	05/01/2012	Biology	39	348	0.0	0	0	0.0	0	0	3	0	0	SPRG12		

RESP'T APP 0419

ER 001438

Huntington Beach UHSD

5/17/2019

2016-2017

Student Immunization Card

Page 1

Student Name: Reed, Emily Birthdate: [REDACTED] Status of Requirements: ☐ A. Requirements Met Date: ☐

City: [REDACTED] Grade: 12 Hisp/Latino: N Race: White ☐ B. Currently up-to-date, but more doses are due later. Needs follow-up.

Gender: Female Birth City: [REDACTED] Date: ☐

Program: H State: [REDACTED] Exemption was granted for: ☐ C. Medical Reason - Permanent

Parent/Guardian: Mrs Alicia Reed Country: United States Of America ☐ D. Medical Reasons - Temporary

☐ E. Personal Beliefs

	Date1	Date2	Date3	Date4	Date5	Booster	Exemptions	Comment
Polio	3/10/1997	5/20/1997	3/09/1998	6/08/2001				
DTP	1/10/1997	3/10/1997	5/20/1997	3/09/1998	6/08/2001			
Tdap						3/5/2008		
MMR	3/09/1998	6/08/2001						
HEP/A	6/08/2001	8/19/2003						
HEP/B	11/19/1996	1/10/1997	3/10/1997					
Varicella		7/21/1998	6/21/2011					
HIB	1/10/1997	3/10/1997	5/20/1997	3/09/1998				
Physical								
MCV4								
TB Skin Test	8/26/2011	8/28/2011						0mm-enrolling
Chest X-Ray			Normal	Abnormal				
Records:	Other							

RESP'T APP 0420

ER 001439

Huntington Beach UHSD

5/17/2019

2016-2017

Student Assertive Discipline Record

Page 1

Filtered by Student

Student ID	Student Name	Gender	Grade	Program
* [REDACTED]	Reed, Emily	Female	12	H

Date	Tag	Item
10/27/2014	A	1

OFFENSES Student is not Special Ed, but was at the time of this incident.

Violation #1: TL Truancy Letter Sent

Violation #2:

Violation #3:

Violation #4:

Violation #5:

Incident ID : 0 School of Incident: 0

Referred by: ISupdate Initials: Instruct Support? :

Demerits: 0.00 Removal to Interim Alternate Setting:

DISPOSITIONS FROM DSP

Disposition: C2 District Truancy Letter Sent

Result: Not Applicable

Placement:

Days: 0.00 Hours: 0.00

Start Date: 10/27/2014 End Date: 10/27/2014 Return Date:

Authority:

Return Status:

Return Location:

Susp/Exp Tag: Not Applicable

COMMENTS

Unexcused On: Periods:

2014-10-21 4,5,6

2014-10-09 4

2014-09-16 6

4/30/2014 A 2

OFFENSES Student is not Special Ed, but was at the time of this incident.

Violation #1: TL Truancy Letter Sent

Violation #2:

Violation #3:

Violation #4:

Violation #5:

Incident ID : 0 School of Incident: 1 Huntington Beach High School

Referred by: mtabata Initials: Instruct Support? :

Demerits: 0.00 Removal to Interim Alternate Setting:

DISPOSITIONS FROM DSP

Disposition: C2 District Truancy Letter Sent

Result: 0 Not Served

Placement:

Days: 0.00 Hours: 0.00

Start Date: 4/30/2014 End Date: 4/30/2014 Return Date:

Authority:

Return Status:

Return Location:

Susp/Exp Tag: Not Applicable

COMMENTS

Unexcused On: Periods:

09/11/2013 04

04/21/2014 02

04/22/2014 02

04/23/2014 02

RESP'T APP 0421

ER 001440

Huntington Beach UHSD

5/17/2019

2016-2017

Student Assertive Discipline Record

Page 2

Filtered by Student

Student ID	Student Name	Gender	Grade	Program
* [REDACTED]	Reed, Emily	Female	12	H

Date Tag Item

3/4/2013 A 3

OFFENSES Student is not Special Ed, but was at the time of this incident.

Violation #1: TL Truancy Letter Sent

Violation #2:

Violation #3:

Violation #4:

Violation #5:

Incident ID : 0 School of Incident: 1 Huntington Beach High School

Referred by: mtabata Initials: Instruct Support? :

Demerits: 0.00 Removal to Interim Alternate Setting:

DISPOSITIONS FROM DSP

Disposition: C2 District Truancy Letter Sent

Result: 0 Not Served

Placement:

Days: 0.00 Hours: 0.00

Start Date: 3/4/2013 End Date: 3/4/2013 Return Date:

Authority:

Return Status:

Return Location:

Susp/Exp Tag: Not Applicable

COMMENTS

Unexcused On: Periods:

12/03/2012 07

01/30/2013 07

03/04/2013 03,04

Total Demerits: 0.00

RESP'T APP 0422

ER 001441

EXHIBIT 5

EXHIBIT 5

EXHIBIT 5
RESP'T APP 0423

REED, EMILY
AKA:

DOB: [REDACTED] F



UC Irvine Health

Neuropsychiatric Center
DISCHARGE/RELAPSE PREVENTION
Part II

Patient's Name: _____

V. My follow-up plan is: _____

VI. After Discharge, the doctor prescribing my medication is:

MD _____ Phone: _____

If I have problems with my medications, or my symptoms get worse, I will call my doctor.

VII. My next appointment is: _____

VIII. Medications I currently take:

Name	Dose	Frequency
Ultram	1.5 mg	2 x a day
Prozac	40 mg	daily
Melatonin	5 mg	@ bedtime
Lamictal	17.2 mg	@ bedtime
Phazoma	2 mg	@ bedtime
Miltivarin	1 tab	daily

To help me remember, I will take them: ☐ AM, when waking ☒ with meal ☒ at bedtime

IX. If my symptoms become severe, I will call the crisis line 714-456-7000

UCI Medical Center Emergency Room
101 The City Drive
Orange, California 92868-3298
or nearest Emergency Room

Other Resources:

UCI Outpatient Department: (714) 456-5902
Mental Health Association: (714) 547-7559
Alliance for the Mentally Ill (714) 544-8488

Other: _____

Patient's Signature: _____ Date: _____ Time: _____

Staff Signature: (if assisted) [Signature] Date: 4/7/14 Time: 0714

Interpreter's Signature: _____ Date: _____ Time: _____

Part II to be completed day of discharge.

☐ Completed Independently ☐ Completed With Assistance ☐ Incomplete Because: ☐ Pt. Refused ☐ EHA Pt. ☐ Other _____

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

REED, EMILY
AKA:

DOB: [REDACTED] F

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:				PATIENT MEDICATIONS #:					
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WIP						
	Shirt/Blouse	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Shoes/Slippers	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Socks/Hosiery	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Sweater/Jacket	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WIP						
	Undergarments	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Other:	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Other:	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
5	Other: T-shirts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WIP						
PROSTHETIC DEVICES									
	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other:								
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand **I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession.** eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: [Signature] Date: 3/24/14 Time: 18:05

Hospital Staff Print Name: SAMIR DRIDJ RN Date: 3/24/14 Time: 18:05

Second witness if patient unable to sign: _____ Date: _____ Time: _____

If items are sent home, person's signature: _____ Date: _____ Time: _____

*Legend: S = Send R = Receive

RESP'T APP 0425

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB:

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:				PATIENT MEDICATIONS #:					
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Shirt/Blouse	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
2	Shoes/Slippers	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	C						
2	Socks/Hosiery	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	C						
1	Sweater/Jacket	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Undergarments	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other: hair	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other: hair	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other: hair	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	C						
PROSTHETIC DEVICES									
1	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower	watch	WP						
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other:								
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession. eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: X Emily Reed Date: _____ Time: _____

Hospital Staff Print Name: Johanna FH Date: 5/18/14 Time: 1128

Second witness if patient unable to sign: _____ Date: _____ Time: _____

If items are sent home, person's signature: _____ Date: _____ Time: _____

*Legend: S = Send R = Receive

RESP'T APP 0426

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB: [REDACTED] F

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:				PATIENT MEDICATIONS #:					
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Shirt/Blouse	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
2	Shoes/Slippers	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
2	Socks/Hosiery	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	C						
1	Sweater/Jacket	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Undergarments	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other:	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other:	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	C						
1	Other:	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	E						
PROSTHETIC DEVICES									
1	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower		WP						
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other:								
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand **I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession. eg. Laptop computers, cell phones, audio equipment, etc.**

Patient/Responsible Party Signature: X Emily Reed Date: _____ Time: _____

Hospital Staff Print Name: L. Johnson RN Date: 2/18/14 Time: 11:56

Second witness if patient unable to sign: _____ Date: _____ Time: _____

If items are sent home, person's signature: _____ Date: _____ Time: _____

*Legend: S = Send R = Receive

RESP'T APP 0427

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB: [REDACTED] F



UC Irvine Health

Neuropsychiatric Center
DISCHARGE/RELAPSE PREVENTION
Part I

Patient's Name: Emily Reed

I. My illness is: Depression

My illness is characterized by periods of stabilization and periods of relapse (decline in function).
Relapse is often preventable if I am aware of my symptom/warning signs, make the changes indicated and seek help from support people and my physician when the warning signs occur.

II. My symptoms/Warning signs of relapse are:

Appetite

binging, obsessive eating
Anorexia
rapid weight loss or gain

Medication

refusing medications
cheeking medication
self medicating
constantly seeking medications

Suicide

preoccupation with death
thoughts of suicide
self-destructive behavior
suicide or self harm plan

Appearance

poor personal hygiene
poor self care
dramatic makeup & dress

Mood

loss of interest in everything
increased isolation
tearfulness
sleep all the time
unable to sleep
irritable
agitated
anxious
talkative

Substance Abuse

alcohol or substance use
slurred speech
pupils constricted or dilated

Hostility

verbal or physical threats
desire to hurt others
angry outbursts
destruction of property
impulsive behavior

Thought Processes

poor concentration
distractible
confused
hear voices
delusional
obsessive
racing thoughts
suspicious

Social Interaction

withdrawn
intrusive
controlling

III. My symptoms can be reduced by:

taking my medicine as ordered
avoiding street drugs
avoiding alcohol
talking to family and friends
identifying risky situations
diversional activity, TV, Reading
daily routine
safe stable living

walking, exercising
keeping busy
reducing stress
seeing my doctor regularly
attending groups - AA, NA, PHP, other
other

IV. My supports are: (list friends, family, self-help groups' etc.)

Name: Alecia Draper (mom) Address: [REDACTED] Phone: [REDACTED]

Name: Jeff Reed (dad) Address: [REDACTED] Phone: [REDACTED]

Name: Lisa (aunt) Address: [REDACTED] Phone: [REDACTED]

Patient's Signature: Emily Reed Date: 4-7-14 Time: 9:21 am

Staff Signature: (if assisted) [Signature] Date: 4/7/14 Time: 1004 am

Interpreter's Signature: _____ Date: _____ Time: _____

Part II to be completed day of discharge.

☐ Completed Independently ☐ Completed With Assistance ☐ Incomplete Because: ☐ Pt. Refused ☐ EHA Pt. ☐ Other _____

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB: F

UCIMC NEUROPSYCHIATRIC CENTER
Adult Inpatient Services
SECLUSION / RESTRAINT ADVISEMENT

Patient Identification

UCI Medical Center has a "Zero Tolerance for Violence" policy.

We want to inform you about the use of seclusion and restraint in our hospital. California State Law and UCI Hospital Policy state that **seclusion or restraint is only used when alternative methods are not sufficient to protect the patient or others from injury.**

Seclusion is the involuntary confinement of a person alone in a room where the person is physically prevented from leaving. A restraint is defined as any method of physically restricting a person's freedom of movement, physical activity or normal access to his/her body.

It is the goal of our hospital to provide a safe environment for all of our patients, families and staff.

In an emergency, a patient may be placed in seclusion or restraints. This is done only when other interventions fail to maintain a safe environment. While in seclusion or restraints, a patient is under continuous observation, with frequent assessments and is released as soon as criteria for safety are met.

In the event of an episode of seclusion or restraint, you have the right to decide whether you wish your family/significant other to be notified.

- ☒ Yes, I wish the following to be notified:
☐ I do not wish anyone to be notified.

Name: Alacia Kremidos Relationship: MOM
Telephone number: _____

Please help us by completing the following:

- | | |
|--|---|
| Do you have problems with managing your anger or controlling your behavior? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Do you have a history of being sexually or physically abused? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Do you have any pre-existing medical conditions / physical disabilities / limitations? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

Please explain any yes answers: _____

It is important that we know any methods or tools that help you control your behavior.

What makes it difficult for you to manage your feelings and control your behavior?

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> involuntary admission | <input type="checkbox"/> someone cursing | <input type="checkbox"/> people in uniforms | <input checked="" type="checkbox"/> yelling |
| <input type="checkbox"/> someone calling you names | <input type="checkbox"/> someone standing too close | <input type="checkbox"/> authority figure saying "No" | <input type="checkbox"/> loud noises |
| <input type="checkbox"/> waiting for medication | <input type="checkbox"/> redirection from staff | <input type="checkbox"/> people ignoring you | <input type="checkbox"/> television |
| <input type="checkbox"/> having to wait when asking for something | <input type="checkbox"/> a roommate that snores | <input checked="" type="checkbox"/> being isolated | <input checked="" type="checkbox"/> being touched |
| <input type="checkbox"/> no access to money, cigarettes, clothes or _____ | | | |
| <input type="checkbox"/> _____ | | | |

What helps you to manage your feelings and control your behavior?

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> a change of scenery | <input type="checkbox"/> thinking of something pleasant | <input type="checkbox"/> talking to someone | <input type="checkbox"/> having a snack |
| <input checked="" type="checkbox"/> physical exercise | <input type="checkbox"/> being alone in a quiet place | <input type="checkbox"/> looking at books | <input type="checkbox"/> soft music |
| <input type="checkbox"/> doing crafts / activities | <input type="checkbox"/> relaxation exercises | <input checked="" type="checkbox"/> going for a walk | <input checked="" type="checkbox"/> counting |
| <input type="checkbox"/> thinking of consequences | <input type="checkbox"/> talking positive to yourself ("stay cool...I can handle it...take it easy") | | |
| <input type="checkbox"/> watching TV | <input type="checkbox"/> medications (specify): _____ | | |
| <input type="checkbox"/> other: _____ | | | |

- ☐ Patient was unable to process, at time of admission. Attempted by: _____

X Emily Reed
Signature of patient

J. K. ...
Staff signature

Staff / date & time
3/18/14 11:40
date/time

3/18/14 1140
date/time

RESP'T APP 0429



UC Irvine Health

**Authorization for Release
of Health Information**

Patient Name: Emily C. Reed **pt**

Date of Birth: [REDACTED]

Patient Address: [REDACTED]

City State Zip Code

Phone Number: [REDACTED]

Medical
Record Number: [REDACTED]

I authorize UC Irvine Healthcare to release health information to:

Emily C. Reed
Name of person or facility to receive health information

Specify name/title of person to receive health information, if known

SAME AS ABOVE
Street Address, City, State, Zip Code

SAME AS ABOVE
Phone number

RECEIVED
MAY 04 2015
UCIMC-HIM
MEDICAL CORRESPONDENCE

INFORMATION TO BE RELEASED

<input checked="" type="checkbox"/> Discharge Summary	<input checked="" type="checkbox"/> Laboratory Reports	<input checked="" type="checkbox"/> Emergency Medicine Reports
<input type="checkbox"/> Billing Statements	<input type="checkbox"/> Dental Records	<input checked="" type="checkbox"/> History & Physical Exams
<input checked="" type="checkbox"/> Pathology Reports	<input checked="" type="checkbox"/> Operative Reports	<input checked="" type="checkbox"/> Diagnostic Imaging Reports
<input checked="" type="checkbox"/> EKG	<input checked="" type="checkbox"/> Radiology Reports	<input checked="" type="checkbox"/> Consultations
<input checked="" type="checkbox"/> Progress Notes		<input checked="" type="checkbox"/> Outpatient Clinic Records
<input type="checkbox"/> Vaccinations/Immunizations		
<input type="checkbox"/> Other _____		

SPECIFY THE DATE OR TIME PERIOD FOR INFORMATION SELECTED ABOVE

3-2014 - Present.

SPECIFIC AUTHORIZATIONS

The following information will not be released unless you specifically authorize it by marking the relevant box(es) below:

- ☐ I specifically authorize the release of information pertaining to drug and alcohol abuse diagnosis or treatment (42 C.F.R. §§2.34 and 2.35).
- ☒ I specifically authorize the release of information pertaining to mental health diagnosis or treatment (Welfare and Institutions Code §§5328, et. seq.)
- ☐ I specifically authorize the release of HIV/AIDS testing information (Health and Safety Code §120980(g)).
- ☐ I specifically authorize the release of genetic testing information (Health and Safety Code 124980(j)).

81610 (Rev 7-21-10)

COPIED BY
HEALTHPORT
RESP'T APP 0430
05/14/2015

PL 000007
psychic auth letter.

5415
RADA



81610

THE PURPOSE OF THIS RELEASE IS *(check one or more)*

- ☐ Continuity of care or discharge planning
☐ Billing and payment of bill
☒ At the request of the patient/patient representative
☐ Other (state reason) _____

NOTICE

UCIMC and many other organizations and individuals such as physicians, hospitals, and health plans are required by law to keep your health information confidential. If you have authorized the disclosure of your health information to someone who is not legally required to keep it confidential, it may no longer be protected by state or federal confidentiality laws.

MY RIGHTS

- ☒ I understand this authorization is voluntary. Treatment, payment enrollment or eligibility benefits may not be conditioned on signing this authorization except if the authorization is for: 1) conducting research-related treatment, 2) obtaining information in connection with eligibility or enrollment in a health plan for 3) determining an entity's obligation to pay a claim, or 4) creating health information to provide a third party. Under no circumstances, however, am I required to authorize the release of mental health records.
- ☒ I may revoke this authorization at any time, provided that I do so in writing and submit it to UCIMC c/o Health Information Management, Rt. 118, Bldg. 25, Orange, CA 92868. The revocation will take effect when UCIMC receives it, except to the extent that UCIMC or others have already relied on it.
- ☒ I am entitled to receive a copy of this Authorization.

EXPIRATION OF AUTHORIZATION

Unless otherwise revoked, this authorization expires _____ (insert applicable date or event).
If no date is indicated, this authorization will expire 12 months after the date of signing this form.

PERSONAL USE

I understand I will be charged a per page fee for copies produced for my personal use.

ER
Initial

SIGNATURE

Emily Reed ✓
(Signature of Patient or Patient's Legal Representative)

Emily Reed
Printed Name

Date: May 4, 2015
Time: 2:10 AM/PM

(If signed by someone other than the patient, state your legal Relationship to the patient/authority)

Witness or Translator

Mail form with original signature to:
UC Irvine Healthcare
Health Information Management
Building 25, Route 118
101 The City Drive South
Orange, California 92868

714-456-5670
RESPT APP 0431

UC Irvine Medical Center
PSYCH RECORD AUTHORIZATION

Wednesday May 6, 2015 02:23 PM

Robert Bota
200 S. Manchester Ave., Suite 206

Last visit date:
Department: NEUR
Number: 110882
Telephone:

Dear Physician:

REGARDING: MR#:

NAME:

Reed, Emily

DOB:

We have received an authorization from the above referenced patient requesting that copies of his/her psychiatric care records be released directly to him/her. Before we can release such records to the patient, we need to ensure that the patient's well-being will not be compromised by doing so.

Please indicate below whether or not you approve the release of the records to the patient. Please return the record (if provided) and this form to the Correspondence Secretary in the HIM Dept., Bldg. 25, Rt 118, once completed.

Thank you,

Correspondence Secretary
UCI Medical Center - Orange
(714) 456-5670

☒ I, Dr. Bota, DO approve the release of this patient's medical records directly to the patient.

☐ I, Dr. _____, DO NOT approve the release of this patient's medical records directly to the patient as I feel it may be detrimental to the patient's well-being.

Bota
Physician Name

5 6 15
Date

REED, EMILY
AKA:

DOB: [REDACTED] F

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:			PATIENT MEDICATIONS #:						
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
2	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
3	Shirt/Blouse	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Shoes/Slippers	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Socks/Hosiery	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Sweater/Jacket	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
2	Undergarments	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Other: 1 pair of socks	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Other: 1 pair of socks	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Other: 1 pair of socks	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
PROSTHETIC DEVICES									
	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other: 1 pair of socks	<input checked="" type="checkbox"/> Intact							
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand I am **responsible for the items I keep with me and release the hospital from any responsibility for items in my possession.** eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: _____ Date: 4/18/15 Time: 11:05

Hospital Staff Print Name: _____ Date: 4/18/15 Time: 1405

Second witness if patient unable to sign: _____ Date: _____ Time: _____

If items are sent home, person's signature: _____ Date: _____ Time: _____

*Legend: S = Send R = Receive

RESP'T APP 0433

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA

DOB: [REDACTED]

UNIVERSITY of CALIFORNIA • IRVINE HEALTHCARE

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:				PATIENT MEDICATIONS #:					
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				CODES					
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Pants/Shorts	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Shirt/Blouse	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Shoes/Slippers	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Socks/Hosiery	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Sweater/Jacket	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Undergarments	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Other: wrist watch	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
1	Other: Rock	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Other:	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
PROSTHETIC DEVICES									
	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other:								
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession. eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: Emily Reed Date: 4/16/15 Time: 1:15
 Hospital Staff Print Name: Reece Michaels Date: 4/16/15 Time: 1:15
 Second witness if patient unable to sign: _____ Date: _____ Time: _____
 If items are sent home, person's signature: _____ Date: _____ Time: _____

*Legend: S = Send R = Receive

RESP'T APP 0434

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.



CONFIDENTIAL PATIENT INFORMATION
Discharge Instructions - Inpatient

REED, EMILY

18y

F

BOTA, ROBERT

MHMP 222E-01 Med Psych MH 2-S

Admission/Discharge Dates

Admission Date: 04-18-2015

Discharge Date: 04-20-2015

Discharge Attending:

Attending, BOTA, ROBERT, MD (A), Psychiatry

Discharge Information/Instructions

- Discharge Disposition: home
- Condition at Discharge: stable, improved
- Diet at discharge: regular
- Activity on discharge: activity as tolerated
- Equipment: none

Questions Regarding Prescriptions

Consumer Med Safety web address For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>

Follow Up Appointments

Follow Up Appointments: Follow up with your primary care provider

Referrals: Adult:

- Private Physician: An appointment has been made for you with Dr Nayana Shah on Thursday 04/23/2015 at 2:00pm. The office is located at 16152 Beach Blvd Suite 200 Huntington Beach, CA. If unable to keep this appointment please make sure to reschedule 714-841-6772.

Special Instructions/Safety Measures

For patients with Heart Failure, please weigh yourself as soon as you get home and every morning. Call your regular doctor or cardiologist with a weight gain of 3 pounds in a day or 5 pounds in a week. This may signal too much fluid and worsening of your Heart Failure.

Per Section 5331, Welfare and Institutional Code, State of California;

No person may be presumed incompetent because he or she has been evaluated or treated for mental disorder or chronic alcoholism, regardless of whether voluntary or involuntary received.

RESP'T APP 0435



Discharge Instructions - Inpatient

REED, EMILY

18y

F

BOTA, ROBERT

MHMP 222E-01 Med Psych MH 2-S

If your insurance company requires authorization for follow up care, please call them before making an appointment.

For information regarding advanced directive, call the California Health Decisions in Orange.

For information regarding health education classes, call toll free 877-UCI-DOCS.

To request an appointment or prescription renewal, view your health records, and contact your physician through myHealthcare, visit <https://myhealthcare.healthcare.uci.edu/PPUI/Anonymous/Login.aspx>.

Return to nearest emergency room right away for chest pain, worsening stomach pain, trouble breathing, dizziness when standing, trouble walking or thinking. For other symptoms, if you are unable to reach your doctor, see the doctor in the UCI Medical Center Emergency Room.

Please notify your physician or emergency department nurse of persistent redness, swelling, pain or numbness at the site of a previous IV.

If you smoke, now is the time to quit. Call 1-877-UCI-DOCS for free stop smoking classes.

Physician Signature: _____, MD

Instructions given by: *[Signature]*, RN Interpreter: _____

PATIENT: I have received a copy of these instructions and I understand the information and my responsibility for on-going care needs.

Patient - *Emily Reed*

OTHER RESPONSIBLE PERSON _____

After you leave the hospital you will receive a survey. Your feedback is the most important way for us to judge how we are doing. If your health care and service needs were met we encourage you to reward us with a score of 5 on the survey questions. You may also provide specific written comments if you wish to do so.

RESP'T APP 0436

REED, EMILY
AKA:

DOB: [REDACTED] F



UC Irvine Health

Neuropsychiatric Center
DISCHARGE/RELAPSE PREVENTION
Part II

Patient's Name: Emily Reed

V. My follow-up plan is: See therapist, go to an outpatient program

VI. After Discharge, the doctor prescribing my medication is:

MD Dr. Shah

Phone: 714 841-6772

If I have problems with my medications, or my symptoms get worse, I will call my doctor.

VII. My next appointment is: 4-23-15 2:00 pm

VIII. Medications I currently take:

Name	Dose	Frequency
<u>Prozac</u>	<u>40mg</u>	<u>daily</u>
<u>Lorazepam</u>	<u>1mg</u>	<u>as needed 6 hours</u>

To help me remember, I will take them: ☐ AM, when waking ☐ with meal ☐ at bedtime

IX. If my symptoms become severe, I will call the crisis line 714-456-7000

UCI Medical Center Emergency Room
101 The City Drive
Orange, California 92868-3298
or nearest Emergency Room

Other Resources:

UCI Outpatient Department: (714) 456-5902
Mental Health Association: (714) 547-7559
Alliance for the Mentally Ill (714) 544-8488

Other: _____

Patient's Signature: Emily Reed

Date: 4-20-15

Time: 1600

Staff Signature: (if assisted) _____

Date: _____

Time: _____

Interpreter's Signature: _____

Date: _____

Time: _____

Part II to be completed day of discharge.

☐ Completed Independently ☐ Completed With Assistance ☐ Incomplete Because _____

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB: [REDACTED] F

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

PATIENT BELONGINGS LIST

PATIENT VALUABLES #:			PATIENT MEDICATIONS #:						
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
(1)	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
(1)	Shirt/Blouse	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
	Shoes/Slippers	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Socks/Hosiery	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Sweater/Jacket	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Undergarments	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
(1)	Other: Pajama top/bottom	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
(1)	Other:	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
(1)	Other: bra	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
PROSTHETIC DEVICES									
	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other:								
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession. eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: _____ Date: _____ Time: _____
Hospital Staff Print Name: Amelia Brown Date: 4-18-15 Time: 2000
Second witness if patient unable to sign: [Signature] Date: 4-18-15 Time: _____
If items are sent home, person's signature: X Emily Reed Date: 4/20/15 Time: 1100

*Legend: S = Send R = Receive

RESP'T APP 0438

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.

REED, EMILY
AKA:

DOB: [REDACTED] F

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

PATIENT BELONGINGS LIST

REED EMILY

PATIENT VALUABLES #:			PATIENT MEDICATIONS #:						
Qty.	Items	Condition	Admitting Unit/Codes WP - With Patient SH - Sent Home w/ PP - Patient Property C - Controlled Access E - Evidence D - Destroyed/Approved by:	1 st Transfer		2 nd Transfer		D/C	
				S	R	S	R	S	R
	Dress/Skirt	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Hat/Belt/Gloves	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Housecoat/Robe	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Nightgown/Pajamas	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
2	Pants/Shorts	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
3	Shirt/Blouse	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
	Shoes/Slippers	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Socks/Hosiery	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
	Sweater/Jacket	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut							
2	Undergarments underwear	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
	Other: 2 Shampoo 1 Conditioner	<input checked="" type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	WP						
1	Other: Packet of F Gyn	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	PP						
1	Other: Black Rock	<input type="checkbox"/> Intact <input type="checkbox"/> Torn/Cut	PP						
PROSTHETIC DEVICES									
	Dentures: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Partial: <input type="checkbox"/> Upper <input type="checkbox"/> Lower								
	Eyeglasses/Contact(s)								
	Hearing Aid(s): <input type="checkbox"/> R <input type="checkbox"/> L								
	Cane / Walker / W/C								
	Other: Watch 1 Ring Intact		W/P						
TRANSFERS									
No.	To Unit/Room #	Date	Time	Staff Sending Patient	Staff Receiving Patient	Patient Sign			
1st									
2nd									
D/C									

UC Irvine Medical Center is **not responsible** for belonging/valuables brought into the hospital unless such items are placed in the hospital safe. I fully understand I am responsible for the items I keep with me and release the hospital from any responsibility for items in my possession. eg. Laptop computers, cell phones, audio equipment, etc.

Patient/Responsible Party Signature: Emily Reed Date: 4/18/15 Time: 14:05
Hospital Staff Print Name: Burke Date: 4/18/15 Time: 1405
Second witness if patient unable to sign: Emily Reed Date: _____ Time: _____
If items are sent home, person's signature: Emily Reed Date: 4/20/15 Time: 11:00

*Legend: S = Send R = Receive

RESP'T APP 0439

All documentation must indicate the specific date and time of entry and a signature complete with identifying credential, title or classification.



Discharge Instructions - Inpatient

REED, EMILY

18y

F

COX AHERN, SUSAN

T5BD-08 Medical Telemetry

Admission/Discharge Dates

Admission Date: 04-17-2015

Discharge Date: 04-18-2015

Discharge Attending

Attending, COX AHERN, SUSAN, DO (A), Hospital Medicine

Primary Care Provider/Other Providers

Admitting, NGUYEN, KELVIN TRONG, MD (A), Hospital Medicine

PCP, DEBOLD, LORI ANN, MD, Peds: General

Referring, BOTA, ROBERT, MD (A), Psychiatry

Discharge Diagnoses

1. Drug-induced dystonia , Code: 333.72
2. TACHYCARDIA
3. History of schizophrenia , Description: History of schizophrenia , Code: V11.0

Discharge Information/Instructions

- Discharge Disposition: transfer to inpatient psychiatric facility...
- Condition at Discharge: stable
- Rehab Potential full self care
- Discharge Order/Treatment Plan see above summary

Questions Regarding Prescriptions

Consumer Med Safety web address For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>

Follow Up Appointments

Follow Up Appointments: Follow up with your primary care provider

Special Instructions/Safety Measures

For patients with Heart Failure, please weigh yourself as soon as you get home and every morning. Call your regular doctor or cardiologist with a weight gain of 3 pounds in a day or 5 pounds in a week. This may signal too much fluid and worsening of your Heart Failure.

RESP'T APP 0440

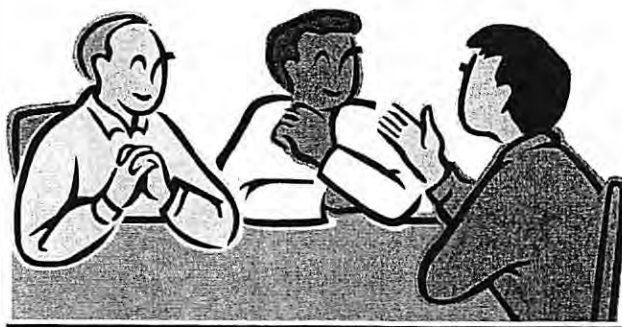
Adult Med-Psych
Unit 2 South
Orientation Guide and
Handbook



For Patients and Families

ORGANIZATIONAL POLICY REGARDING THE USE OF SECLUSION AND RESTRAINTS

It is the goal of UCI Medical Center to provide a safe environment for our patients, visitors and staff. Education to patients and families regarding alternatives to seclusion and restraints will be provided as needed. Seclusion and restraints will only be utilized as a last resort for safety purposes. Patients will be monitored closely by our staff during any restraint or seclusion episode and staff will attend to their needs.



**ALWAYS REMEMBER TO TREAT PEERS, STAFF AND
YOURSELF WITH DIGNITY AND RESPECT**

RESP'T APP 0442



**COUNTY OF ORANGE, CALIFORNIA
HEALTH CARE AGENCY/BEHAVIORAL HEALTH
CARE PATIENTS RIGHTS**

REED, EMILY
AKA:

DOB: [REDACTED] F

Sections 5325 and 5325.1 of the Welfare and Institutions Code and Section 862, Title IX of the California Code of Regulations require that all persons prior to or at the time of their admission to the facility and during their stay, be advised of their rights as patients. There must also be written verification that they have been informed of these rights. This form has been designed to meet the requirements of these regulations. This side of the form will verify that the patient has been advised of his/her rights and provided with a copy of the Patients Rights Handbook. A completed copy shall be given to the person signing the acknowledgment. A completed copy shall be retained in the patient's personal file maintained by the facility. The original shall be filed in the chart.

ACKNOWLEDGMENT I have been personally advised and have received a copy of these rights at the time of my admission

to UOIMC
(NAME OF FACILITY)
X Emily Reed 3/18/14 AND/OR
(SIGNATURE OF PATIENT) (DATE)

as the designated representative of _____
(NAME OF PATIENT)

have been personally advised and have received a copy of these rights at the time of his/her admission to

UOIMC
(NAME OF FACILITY)
✓ [Signature] 3-18-14
(SIGNATURE OF DESIGNEE) (TITLE: PARENT, GUARDIAN, ETC.) (DATE)

RECONOCIMIENTO Yo he sido personalmente informado y haber recibido una copia de estos derechos en el momento de mi admisión a

(NOMBRE DE FACILIDAD)

(FIRMA DEL PACIENTE) (FECHA) Y/O

Yo, como el representante designado de _____
(NOMBRE DEL PACIENTE)

He sido personalmente informado y haber recibido una copia de estos derechos en el momento de su admisión

(NOMBRE DE FACILIDAD)

(NOMBRE DEL DESIGNADOR) (TITULO: PADRES, GUARDIAN, ETC.)

RESP'T APP 0443



Discharge Instructions - Inpatient

DEED, EMILY

18y

F

BOTA, ROBERT

MHMP 222E-01 Med Psych MH 2-S

Medication List

Discharge Medications

- LORazepam 1 mg oral tablet
Instructions: 1 tab(s) orally every 6 hours, As Needed, anxiety
(written prescription)

Last dose taken: 4/20/15 at 8:30 Am and Next dose due at: AS needed every 6 Hours

- FLUoxetine 20 mg oral tablet
Instructions: 2 tab(s) orally once a day
Indication: for depression
(written prescription)

Last dose taken: 4/20/15 at 9 Am and Next dose due at: 4/21/15 at 9 Am

For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>

For Your Safety

Please check with your primary physician if you should take any medications(s) not on this list.
Keep a complete list of the medications you take with you at all times.
Provide a copy to your primary care provider and at each care visit.
Update your medication list with every change.

RESP'T APP 0444

**INVOLUNTARY PATIENT ADVISEMENT
(TO BE READ AND GIVEN TO THE
PATIENT AT TIME OF ADMISSION)**Confidential Patient Information
See W&I Code Section 5328 and
HIPAA Privacy Rule 45 C.F.R. Section 164.508

Name of Facility

UCI MEDICAL CENTER

Patient's Name

EMILY REED

Admission Date

4/16/15

Section 5150(h) of the Welfare and Institutions Code requires that each person admitted to a facility designated by the county for evaluation and treatment be given specific information orally and in writing, and in a language or modality accessible to the person and a record of the advisement be kept in the person's medical record.

My name is Tony My position here is RN

You are being placed in this psychiatric facility because it is our professional opinion, that as a result of a mental health disorder, you are likely to: (check applicable)

☒ Harm yourself☐ Harm someone else☒ Be unable to take care of
your own food clothing or shelter

(List specific facts upon which the allegation of dangerous or gravely disabled due to mental health disorder is based, including pertinent facts arising from the admission interview):

We believe this is true because YOU REPORTED HEARING VOICES, RAN
INTO PARKING LOT, ROLLED AROUND ON GROUND AND
SCREAMED FOR 35 MINUTES, IN DANGER OF HARMING SELF

You will be held for a period of up to 72 hours. This (does not) ~~(does)~~ include weekends or holidays.

Your 72-hour period begins: 4/16/15 @ 19:00

(Time and Date)

Your 72-hour evaluation and treatment period will end at: 4/19/15 @ 19:00

(Time and Date)

You will be held for a period up to 72 hours. During the 72 hours you may also be transferred to another facility. You may request to be evaluated or treated at a facility of your choice. You may request to be evaluated or treated by a mental health professional of your choice. We cannot guarantee the facility or mental health professional you choose will be available, but we will honor your choice if we can.

During these 72 hours you will be evaluated by the facility staff, and you may be given treatment, including medications. It is possible for you to be released before the end of the 72 hours. But if the staff decides that you need continued treatment you can be held for a longer period of time. If you are held longer than 72 hours, you have the right to a lawyer and a qualified interpreter and a hearing before a judge. If you are unable to pay for the lawyer, then one will be provided to you free of charge.

If you have questions about your legal rights, you may contact the county Patients' Rights Advocate at (714) 834-5647 (phone number of county Patients' Rights Advocacy Office).

Good cause for Incomplete Advisement

Date

Advisement Completed by

Position

RN

Language or Modality Used

ENGLISH

Date

4/16/15

CC: Original to the Patient
Carbon to the Patient's Record

RESPT APP 0445

REED, EMILY

MR#: [REDACTED]

Visit#: [REDACTED]

DR: NGUYEN, KELVIN TRONG

Gender: Female

DOB: [REDACTED]

Age: 18y

Admit Date: 04/16/2015 14:11

Discharge Date: 04/17/2015 12:01

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

- Evaluation Date and Time: 04-16-2015 11:26
- Admission Date: 04-16-2015
- Referring Attending Physician: CHAKRAVARTHY, BHARATH [MD (A)]
- Reason for Referral: +AH, confusion w/h/o MDD w/psychosis

Chief Complaint and History of Present Illness:

- History of Present Illness: Ms Reed is an 18 year old female with a history of PTSD, Depression w/psychotic features who was BiBA today after she became agitated at school and was rolling around on the asphalt at her high school (Marina HS).

School psychologist said that she was shaking in the bus on the way to school. She told her school counselor, "it is loud in my head, I don't want to go back, I don't understand, I don't want to go to the hospital." Then she took off running in the parking lot at the school then dropped down in the middle of the street rolling around on the ground in the fetal position for 35 minutes. Per psychologist report, She continued to scream in the middle of the street for the entire 35 minutes she was rolling around on the ground. The school counselor was concerned she was going to hurt herself.

Paramedics transported the patient to UCIMC.

She was given IM Versed 5mg during transport. On arrival to UCIMC she required restraints and IM Haldol and Benadryl for agitation. She was placed on 5150 for DTS 4/16/15 @ 1400.

Patient is asleep at time of interview with restraints removed.

The following information was provided by pts mother and step father who were bedside:

She went back to school after changing pathway program IEP on Monday. She has 2 classes to graduate. Over spring break she was functioning fine and had no escalation. School triggers her to feel more anxiety but she wanted to try. She would call and check in with mother and her anxiety was 7-8/10. She also told mother it was because this class was smaller 3-4 kids and so she feels everyone is watching her. She met with new therapist this week Therapist Elisse Collier (562-335-9552); seen her twice last Mon and Wed before but she isn't opening up to therapist. Her psychiatrist is also new and mother could not provide name of that person. They have seen her new psychiatrist once. Mother said since starting back Monday, she was anxious everyday after school. Monday was difficult for her and she talked to psychologist outside the classroom for most of the 2 hour session. Yesterday she did well (per step father.) Today she ran into parking lot and the parents don't know the details. They called paramedics to come and she was given Ativan IM (versed per EMS) at the scene. Recently she has been doing trauma processing work and has been dissociating. Her therapist is using a rock to help her stay in the moment. She talked to mother earlier and repeated the affirmations, "I'm loved" and "I can get through it" She told mother she had suicidal ideation with plan but wouldn't act on it. Per mother: "She doesn't want to die". Mother and daughter have safety contract and she also has one with the counselor and psychiatrist. When asked about AH, mother said "She said her 'head was really loud' but she wasn't able to explain it". She puts in earplugs because the outside voices are loud (she currently has earplugs in and is holding rock in plastic bag). She told mother there were two voices and she said I knew if ...repeating that sentence numerous times.

Another significant stressor is the upcoming case against the man who is accused of sexually abused her. She is scheduled to testify in court which includes see the alleged man again. Per the patients mother - The man's mother lives 20 minutes from them and the man has made threats against the family and has shown them a gun. The patient mother reports that the police are unable to file a restraining order against the alleged

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

perpetrator. She said "she won't feel safe until he is in prison and he won't go to prison until she testifies. Until then, he is on home arrest."

Her last hospitalization was DeAno hospital (Feb/March 2015) where she was admitted on a 5150 for suicidal ideation. It is believed that attempting to return to school was the inciting stressor. She was there for almost a month and was discharged 3 weeks ago. Since that time, she has seemed to do well but was complaining to mother she didn't like the Abilify because it was making her have tremors and she was agitated and didn't feel safe driving the car so that was recently stopped. She is currently on Prozac 40mg but mother isn't sure about other medications or even name of new psychiatrist. Her first hospitalization was at UCI in 3/2014 when she first told staff about her sexual abuse at the hands of a friend of her father's and was beginning to talk about the events. She was given dx of PTSD, MDD and SAD and started on Prozac 40mg daily, Clonazepam 1.5mg po BID, Prazosin 2mg po nightly, Melatonin 3mg po nightly and Lorazepam 1mg po q6h prn anxiety.

Mother said that she took those medication for 3 months then stopped them all complains of various side effects of which the step father seems unconvinced were real. She was also going to Center for Discovery for 4 weeks after getting out of UCI but mother said she was on so much medication she was falling down. She saw a new psychiatrist who stopped the Abilify recently. Mother thinks that her attempting to go back to school has been trigger for last two admission. She has been working with a therapist and mother said she is beginning to open up but it has also caused some flashbacks and panic attacks making her want to kill herself. Mother said "she is still holding a lot of anxiety". Of note: Mother was clearly anxious and speaking quickly during interview.

Robin Moses Case mgr 714-373-0517

Brain optimization assessment Mon Rick Tomey- Per collateral it showed that she is always in a state of trauma and unable to talk about her feelings.

Psychiatric ROS -

Depression ROS not completed at this time due to patient sedation

SUICIDE: suicidal ideation with plan (per mother's report)

HOMICIDE: no per mother

Mania: unknown at this time

HALLUCINATIONS: Told mother she had AH

ANXIETY: mother reports that patient gets agitated, heart palpitations and very scared

PTSD: per mother: positive for Flashbacks, Hypervigilance and nightmares from sexual abuse.

Eating Disorders: no know hx, no parental observation consistent with ED behaviors

Access to firearms? no

Do you feel safe in hospital? patient sedated, unable to answer

Would you be willing to contract for safety? patient sedated, unable to answer

Collateral: Alicia Draper [REDACTED] mother;

Medical ROS: patient sedated, unable to answer

REED, EMILY

MR#: 2342274

Visit#: 2043855341

DR: NGUYEN, KELVIN TRONG

Gender: Female

DOB: [REDACTED]

Age: 18y

Admit Date: 04/16/2015 14:11

Discharge Date: 04/17/2015 12:01

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

PAST PSYCHIATRIC HISTORY:

- Diagnoses: PTSD, MDD w/psychotic features.
- Prior hospitalizations: # 2
- First hospitalization: UCI 4/2014 x 1 mo; Del Amo 5150 DTS 3/2015 x 1 mo
- Last hospitalization: 3 weeks ago Del Amo
- Suicide attempts: no
- Psych MD: Dr. Shah 714-841-6227; Therapist Bisse Collier (562-336-9552);
- Self Harm behaviors: no

MEDICATION HISTORY:

CURRENT: Prozac 40mg daily

PAST med trials: Abilify- akathisia,

Clonazepam 1.5mg po BID, (d/c'd)

Prazosin 2mg po nightly, (d/c'd)

Melatonin 3mg po nightly (d/c'd)

Lorazepam 1mg po q6H prn anxiety. (d/c'd)

PAST MEDICAL/SURGICAL HISTORY:

none

LMP: unknown

Allergies & Intolerances:Allergies:

- No Known Allergies:

Medications:

- Medications: diphenhydramine Injection 5 mg (given)
- haloperidol Injection 5 mg (given)
- Home Medications: Home Medications List is Complete.
- Prozac 40 mg oral capsule 1 cap(s) orally once a day
- Abilify - stopped per mother

Social History:

- Smoking Status: never smoker⁽¹⁾
- Chewing Tobacco: no⁽²⁾
- Frequency of Alcohol Intake: never⁽³⁾
- Substance Use: Substance abuse hx Denies use of etoh, illicit, or tobacco⁽²⁾
- Patient Lives With: parent
- Relationship Status: single / never married
- Children: no

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: 2043855341

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

• **Details: Social:**

Developmental: Patient met all developmental milestones as expected. She has always had A's in school, although mother reports that she tested at 1st grade reading level while in 4th grade. She had failed multiple hearing tests but her repeat tests were inconsistent indicating possible malingering and her brainstem testing in 2013 demonstrated no hearing loss.

She grew up in Las Vegas and moved to Huntington Beach with her mother 3 years previously. She lives with her mother, and 2 brothers age 13.15. Mother has remarried although (Jeff) new husband lives in Brea do to work. Parents divorced in 2006 and parents have joint legal custody and mother Alicia Draper (714 916 1524) has majority physical custody. Emily and her 2 brothers go to Vegas to stay with their father (Jeff) 702 241 2486, every other weekend and 7 weeks in the summer. Patient has an IEP through school started in 5th grade. Recently went back to school for a few hours a day to get 2 courses done to get GED. Per mother sexual abuse at hands of friend of fathers and is going to have to testify soon.

Family History:

• **Details: Family:** 13 yo brother with MDD, unknown medication hx²⁹

Vital Signs:• **Vitals:** -**First set of Vital Signs**

HR (bpm): 81; Respirations (breaths/min): 16; SBP (mm Hg): 83; DBP (mm Hg): 43; SpO2 (%): 96;

Physical Exam:

• **Exam:** Appearance: stated age, fair grooming and hygiene, wearing hospital clothes, sleeping

Behavior: asleep

Speech: non-verbal, asleep

Mood: non-verbal

Affect: not obtained

Thought content: not obtained

Thought processes: not obtained

Insight: poor

Judgment: poor

Association: not able to evaluate

Neurologic: moving all 4 extremities to gravity

unable to do cognitive

Assessment and Plan:**Active Problem List:**

1. Major depressive disorder;

• **Assessment and Plan:** Ms Reed is an 18 year old female with a history of PTSD, Depression w/psychotic features who was BIBA today after she became agitated at school. She has significant stressors and was too disorganized to protect her own safety at school. She required sedation and emergency medications, after which she is unable contribute additional information to interview. Without her narrative we are unable to determine if her disorganized behavior was due to dissociative episode related to PTSD, psychotic exacerbation related to recent discontinuation of Abilify, behavioral demonstration motivated by desire to escape from school, result of acute stress reaction.

REED, EMILY

MR#: [REDACTED]

Visit#: 2043855341

DR: NGUYEN, KELVIN TRONG

Gender: Female

DOB: [REDACTED]

Age: 18y

Admit Date: 04/16/2015 14:11

Discharge Date: 04/17/2015 12:01

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

The patient has risk factors for suicide including loss of rational thought process, h/o depression, anxiety, organized plan/access (but won't tell mother what it is). Patient is at high immediate risk for suicide.

Axis I: PTSD, Major Depressive Disorder, Social Anxiety Disorder.

Axis II: Deferred

Axis III: Intermittent constipation.

Axis VI: Mod-severe; history of abuse, decline in social and academic functioning, complex family dynamics, repeated unsuccessful attempt to reintegrate into school environment.

Axis V: Global Assessment of Functioning 15

Recommendations:

ED: get UTOX, UPREG.

1. Patient requires inpatient psychiatric hospitalization on basis of DTS - 5150 for DTS 4/16/15 @ 1400. please attempt to find pt placement at Del Amo facility for continuity of care.
2. Please coordinate with case manager to facilitate transfer to accepting, contracted, designated inpatient psychiatric facility.

Recommendations if patient is admitted to UCI:

- Admit to 2S - need to ask her about CFS as she has been sedated in ED.
- Legal status 5150 for DTS 4/16/15 @ 1400.
- Recommend starting Prozac 40mg po daily
- mother says Risperidone recently started too- called Dr. Shah and have not gotten call back yet.

Plan to talk to psychiatrist Dr. Shah 714-841-6227 to confirm her medications.

Above case discussed with and supervised by on-call attending Dr. Allee who agrees with above assessment and plan.

- **Attending Attestation:** I did not see the patient on the day of this note, but I have reviewed the resident/fellow's note and agree with the findings and plan as documented.

Billing:

- **Consult Billing Service Level:** not applicable

Electronic Signatures:

ALLEE, TINA M (MD (A)) (Signed 04-16-2015 16:15)

Author: Chief Complaint and History of Present Illness, Medications, Social History, Assessment and Plan, Note Completion, Billing

Co-Signer: Admission Date, Chief Complaint and History of Present Illness, Allergies & Intolerances, Medications, Social History, Family History, Vital Signs, Physical Exam, Data Review, Assessment and Plan, Note Completion

HOWARD, PAMELA (MD (R)) (Signed 04-18-2015 14:08)

Author: Admission Date: Chief Complaint and History of Present Illness, Allergies & Intolerances,

RESP'T APP 0450

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Consultation, Initial-Psychiatry

04/16/2015 11:26

HOWARD, PAMELA (MD (R))

Medications, Social History, Family History, Vital Signs, Physical Exam, Data Review, Assessment and Plan, Note Completion

Last Updated: 04-16-2015 16:15 by ALLEE, TINA M (MD (A))

References:

1. Data Referenced From "ED Primary Assessment" 4/16/2015 11:05 AM
2. Data Referenced From "H&P-Primary-Psychiatry" 3/18/2014 1:44 PM

RESP'T APP 0451

Page: 6

UC Irvine Health
101 The City Drive | Orange, CA 92668
Results Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Diagnostic Radiology

Chest AP XR

Ordered: 04/17/2015 12:42

Requested By: GLASSY, MATTHEW SCOTT (MD (R))

1 or more Final Results Received

Resulted: 04/17/2015 12:52

Org Performed: RADNET

Chest AP XR

Final

Examination: 71010 CR Chest AP
Report

Procedure: CR Chest AP

Exam Date: 4/17/2015 12:26 PM

Comparison Study: None available at time of dictation.

History: 18 years old Female with mood disorder.

Findings/

Impression: The lungs are clear and there is no effusion. Normal
cardiomediastinal silhouette. Scoliosis of thoracolumbar spine.

***** Final *****

Dictated by: Cyrlak, Dvora, M.D.
12:47 pm

04/17/2015

Electronically Signed by: Cyrlak, Dvora, M.D.
12:47 pm

04/17/2015

Page 1 of 1

RESP'T APP 0452

Page: 1

DIAGNOSTIC RADIOLOGY - Page 1 of 1

UNIVERSITY OF CALIFORNIA IRVINE

Printed: 05/13/2015 07:32

Patient: REED, EMILY

MR#: [REDACTED]

Discharged: 04/17/2015

Service Dates: 04/16/2015-04/17/2015

Copy for: ROI MGT GODOYJ1

REQ: 4070657, DET: 21932545 IK: 65051817 ITR: 20968 EK: 97345777 VER: 1

PL 000029

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Discharge Note.

04/17/2015 11:39

CHOI, BRIAN (MD (R))

Admission/Discharge Dates:

• Admission Date 04-16-2015

• Discharge Date: 04-17-2015

Discharge Attending:

Provider Role	Provider Name	Occupation	Specialty
Attending	BOTA, ROBERT	MD (A)	Psychiatry

Significant Events:

- **Event Description:** Patient was becoming anxious during the morning, stating that the voices were getting louder and louder. Patient then started to posture with arms flexed at elbows, neck extension, with eyes rolled back and intermittent choking sounds with increased time between breaths. Rapid response called. Vital signs were checked which showed elevated heart rate to approximately 170s, blood pressure up to 160/90s, oxygen saturation was maintained above 90% without episodes of apnea. Patient was taken back to her room and laid down in bed. Medication administration reviewed and no new meds given. Only fluoxetine 40mg given earlier at approximately 830am. Chart reviewed which reveals similar episode at school prior to admission to hospital. Rapid response team arrived and evaluated patient prior to transfer to medicine.

Discharge Type and Core Measures:

- Discharge Type Standard
- Smoking Status never smoker

Discharge Instructions:

- Discharge Disposition: transfer to other acute care facility...
- Location: inpatient medicine
- Condition at Discharge: fair
- Discharge Order/Treatment Plan: Activity
Activity - Per Unit Standard of Care
- Medication List:

Discharge Medications

- FLUoxetine 20 mg oral tablet
Instructions: 2 tab(s) orally once a day

Blood Thinners:

no.

Questions Regarding Prescriptions:For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>.**Follow Up Appointments:**

No follow up needed.

RESP'T APP 0453

Page: 1

DISCHARGE NOTE. - Page 1 of 2	UNIVERSITY OF CALIFORNIA IRVINE	PL 000030	04/17/2015 07:32
Patient: REED, EMILY	MR#: [REDACTED]	Discharged: 04/17/2015	Service Dates: 04/16/2015-04/17/2015
Coord for: ROI MGT GODOYJ1	REQ: 4070657, DET: 21932547 IK: 65113425 ITK: 30585 EK: 97586633 VER: 1		

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Discharge Note.

04/17/2015 11:39

CHOI, BRIAN (MD (R))

Note Completion:

- **Attending Attestation:** I was present with the resident/fellow during the history and exam. I discussed the case with the resident/fellow and agree with the findings and plan as documented by the resident/fellow. My additions or revision are included in the record.
- **Attending Comments /Additional Findings/Exceptions:** transferred to medicine for medical stabilization. no allergic reaction.

Billing:

Billing Level:

- **Billing Level::** Less than 30mins of discharge planning, education and care coordination by Attending

Other Instructions-UCI Health Care Team:

Nursing:

The patient left the hospital: by stretcher
 The patient left the hospital with other, staff, Response team
 Medication information sheets were provided for all discharge medications
 Discharge instructions patient and/or family given a copy of the Discharge Note

Authors:

ELECTRONIC SIGNATURES MAY BE ATTRIBUTED TO INDIVIDUALS THAT REVIEWED DOCUMENTATION IN THE LISTED SECTIONS WITHOUT AUTHORIZING CHANGES.

Electronic Signatures:

BOTA, ROBERT (MD (A)) (Signed 04-21-2015 15:05)

Authored: Admission/Discharge Dates, Note Completion, Billing

Co-Signer: Admission/Discharge Dates, Note Completion

CHOI, BRIAN (MD (R)) (Signed 04-21-2015 14:30)

Authored: Admission/Discharge Dates, Providers, Significant Events, Physical Exam on Day of Discharge,

Discharge Information/Instructions/Core Measures, Note Completion, Authorship Disclaimer

PHUNG, QUYEN (Pharmacist) (Signed 04-17-2015 11:59)

Authored: Admission/Discharge Dates, Discharge Information/Instructions/Core Measures

SCHWEIGERT, EMMA (RN) (Signed 04-17-2015 12:07)

Authored: Admission/Discharge Dates, Other Instructions-UCI Health Care Team

Last Updated: 04-21-2015 15:05 by BOTA, ROBERT (MD (A))

REED, EMILY

MR#: [REDACTED]

Visit#: [REDACTED]

DR: NGUYEN, KELVIN TRONG

Gender: Female

DOB: [REDACTED]

Age: 18y

Admit Date: 04/16/2015 14:11

Discharge Date: 04/17/2015 12:01

Service: IP Medicine C

Emergency Physician Treatment Record

04/16/2015 10:41

BREED, WYNNE (MD (R))

Clinician Documentation:

CHIEF COMPLAINT:

HISTORY OF PRESENT ILLNESS:

This patient is a 18 year old female pmh depression, SI, AVH, PTSD s/p sexual assault
 Patient is set at school to be rolling around in thrashing and treatment of parking lots not responding to commands
 and not interacting with staff. Patient has a prior episodes were she has had anxiety worsening and then
 decompensated.
 Patient endorses no fever, no vomiting, no shortness of breath, no rash

symptoms were severe upon arrival

PAST MEDICAL HISTORY:

depression, PTSD s/p sexual assault, anxiety

PAST SURGICAL HISTORY:

denies

ALLERGIES:

No Known Allergies

MEDICATIONS:

See Nursing Medication List

FAMILY HISTORY:

Reviewed and non-contributory.

SOCIAL HISTORY:

denies tobacco, alcohol, or substance use

REVIEW OF SYSTEMS:

Review of systems negative except for those elements noted above in HPI

NURSING NOTES: Reviewed

PHYSICAL EXAM:

VITALS (since 6 AM yesterday):

Tc: 36.9 (Tmax: 37.3 @ 04-16-15 11:49) HR: 87 (81 - 87) BP: 86/39 (83 - 86 / 39 - 43) RR: 15 (15 - 16)
 SpO2: 99% (96% - 99%) Wt: 49.9kg

RESP'T APP 0455

Page: 1

EMERGENCY PHYSICIAN TREAT - Page 1 of 3

UNIVERSITY OF CALIFORNIA IRVINE

PL 000032 04/16/2015 07:32

Patient: REED, EMILY

MRN: [REDACTED]

Discharged: 04/17/2015

Service Dates: 04/16/2015-04/17/2015

COPY FOR: BPT MET CONVOY

RPO: 4070647 DET: 21932550 IK: 65069813 ITK: 23464 EX: 97482526 VER: 1

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Emergency Physician Treatment Record

04/16/2015 10:41

BREED, WYNNE (MD (R))

Gen: age-appropriate, very agitated

Head: NCAT,

Neck: no nuchal rigidity, full range of motion of neck without tenderness, no C-spine tenderness

Eyes: EOMI, no scleral icterus, no conjunctival injection

CV: regular rate and regular rhythm

Pulm: clear to auscultation bilaterally, breathing comfortably

Abd: soft, non-tender, non-distended, no guarding, no rebound

GU: no costovertebral angle tenderness

Musculoskeletal: no T-spine tenderness, no L-spine tenderness

Extremities: no peripheral edema, no extremity tenderness

Neuro: awake, alert, moving all extremities

Psych: non-verbal, thrashing when not in contact w/ pet rock or ice pack

Assessment:

Assessment: 18F pmh PTSD s/p sexual assault BIBA for severe agitation, requiring sedatives en route, and in

ED. Pt is accompanied by mother who is good historian, confirms this is consistent w/ prior behavior when

under stress or having exacerbation of previous PTSD symptoms, improved w/ pet rock and ice bags.

Differential diagnosis PTSD, anxiety, schizophrenia, schizoaffective disorder, major depressive disorder,

bipolar affective disorder with manic or depressive phase, neurotic disorders including borderline,

oppositional defiant, obsessive compulsive, and others. Patient is unable to cope with social situation and

needs urgent evaluation by psychiatrist. If patient expresses suicidal or homicidal ideation and is here

voluntarily, will maintain patient safety with Level II observation by security officer. If involuntary yet graveley

disabled, or danger of self harm or to others, will place on 5150 legal hold. Will exclude acute medical

illness such as electrolyte disorder, dehydration, intoxication, delirium,

withdrawal and overdose.

PLAN: IM benadryl and haldol, psych evaluation, UA, UT ox, consider additional benzo (pt received benzo en

route)

MDM/ED Course:

No evidence of acute organic disease to rule out psychiatric evaluation at this time. Medically cleared. - Breed.

12:03 when the patient initially came to the ED she was severely agitated, in restraints (by EMS) and would not let go

of a rock in her hand and she would not transfer from the EMS gurney to the ED gurney. Due to her severe agitation

we decided to medicate the patient with haloperidol and benadryl for patient safety and for staff safety. Dr.

Chakravarthy.

pt to be admitted for inpt stabilization by psych team. - WB.

Diagnosis is:

Diagnosis: mental health crisis

PTSD

anxiety

depression

REED, EMILY

MR#: [REDACTED]

Gender: Female

Admit Date: 04/16/2015 14:11

Visit#: [REDACTED]

DOB: [REDACTED]

Discharge Date: 04/17/2015 12:01

DR: NGUYEN, KELVIN TRONG

Age: 18y

Service: IP Medicine C

Emergency Physician Treatment Record

04/16/2015 10:41

BREED, WYNNE (MD (R))

Attending Attestation:

Attending Attestation: I was present with the resident/fellow during the history and exam. I discussed the case with the resident/fellow and agree with the findings and plan as documented by the resident/fellow. My additions or revision are included in the record.

NOTE IS READY TO BE COMPLETED Chart is complete and signed

Electronic Signatures:

BREED, WYNNE (MD (R)) (Signed 04-17-2015 16:13)

Authored: HPI, ED COURSE/DISPOSITION, TREATMENT NOTE FINALIZATION

CHAKRAVARTHY, BHARATH (MD (A)) (Signed 04-19-2015 17:54)

Authored: HPI, ED COURSE/DISPOSITION, TREATMENT NOTE FINALIZATION

Last Updated: 04-19-2015 17:54 by CHAKRAVARTHY, BHARATH (MD (A))

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: - 19y...

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Chemistry

Comprehensive Metabolic Panel	Anc ID: F84242	Order ID: 001DKPVJR
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 07:44
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

		Reference Range	
Sodium	142	[135-145 MEQ/L]	Final
Potassium	3.7	[3.3-4.8 MEQ/L]	Final
Chloride	111	[101-111 MEQ/L]	Final
CO2	22	L [25-34 MEQ/L]	Final
Electrolyte Balance	9	[2-12 MEQ/L]	Final
Glucose	78	[70-115 mg/dL]	Final

Normal Fasting Glucose: <100 mg/dl
 Impaired Fasting Glucose: 100-125 mg/dl
 Provisional DX of diabetes(must be confirmed) > 125 mg/dl.

BUN	9	[8-26 mg/dL]	Final
Creatinine	0.6	[0.5-1.3 mg/dL]	Final
Calcium	8.9	[8.4-10.2 mg/dL]	Final
Protein, Total	6.6	[6.1-8.2 G/DL]	Final
Albumin	3.8	[3.2-5.5 G/DL]	Final
Alkaline Phosphatase	60	[26-110 IU/L]	Final
AST	55	H [8-40 IU/L]	Final
ALT	21	[0-60 IU/L]	Final
Bilirubin, Total	1.6	H [0.0-1.4 MG/DL]	Final

Lipid Screen	Anc ID: F84242	Order ID: 001DKPVJS
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 07:59
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

		Reference Range	
Cholesterol	133	[<200 MG/DL]	Final
		<200mg/dL desirable by NCEP guidelines.	
Triglycerides	23	[<150 MG/DL]	Final
		<150mg/dL desirable by NCEP guidelines.	
HDL Cholesterol	47	[>40 MG/DL]	Final
		>40mg/dL desirable by NCEP guidelines.	
Lp(A) Cholesterol	0.9	[0-5 MG/DL]	Final

Result Indicator: L = Low, H = High, A = Abnormal

Page: 1

RESP'T APP 0458

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Reference Range:
0-5 mg/dL = No increased risk for CHD
6-10 mg/dL = Slight increased risk for CHD
11-15 mg/dL = Moderately increased risk for CHD
>15 mg/dL = Significantly increased risk for CHD

VLDL Cholesterol 1 [MG/DL] Final

No target levels have been established by NCEP guidelines.

LDL Cholesterol 84 [<160 MG/DL] Final

Target levels for LDL cholesterol by NCEP guidelines depend on the number of major risk factors:

- <100mg/dL for patients with diabetes or CHD.
- <130mg/dL for patients with 2 or more risk factors excluding diabetes and CHD.
- <160mg/dL for patients with <2 major risk factors.

Non HDL Cholesterol 86 [<130 MG/DL] Final

Target levels for non HDL cholesterol by NCEP guidelines depend on the number of major risk factors.

- <130 mg/dl for patients with diabetes or CHD.
- <160 mg/dl for patients with 2 or more risk factors excluding diabetes and CHD.
- <190 mg/dl for patients with <2 major risk factors.

Vitamin B12 Level	Anc ID: F84242	Order ID: 001DKPVJV
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 08:15
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

Vitamin B12 Level 386 [180-1241 PG/ML] Final

Folate, Serum	Anc ID: F84242	Order ID: 001DKPVJX
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 08:48
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

Folate, Serum 29.0 [>5.9 NG/ML] Final

Thyroid Cascade	Anc ID: F84242	Order ID: 001DKPVJY
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 08:14
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

TSH 1.40 [0.50-5.00 uIU/mL] Final

CK	Anc ID: F84242	Order ID: 001DKRGNY
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 13:44
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

CK 1320 H [22-269 U/L] Final

ADD ON 1240

Result Indicator: L = Low, H = High, A = Abnormal

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92668
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

C Reactive Protein
Ordered: 04/17/2015 06:00
Requested By: ROCHA, EVITA (MD (R))

Anc ID: F84242
Collected: 04/17/2015 06:00

Order ID: 001DKRPBQ
Resulted: 04/17/2015 14:06
1 or more Final Results Received

Reference Range

C Reactive Protein [0-0.7 MG/DL] Final

<0.5
ADDED ON AT 1319

Miscellaneous Test (Chemistry)(LIO)
Ordered: 04/17/2015 06:00
Requested By: ROCHA, EVITA (MD (R))

Anc ID: F84242
Collected: 04/17/2015 06:00

Order ID: 001DLFLHP
Resulted: 04/28/2015 10:14
1 or more Final Results Received

Reference Range

Misc Test Name (Chem) VIT D Final
Misc Test (Chem) (NOTE) Final
Reference Lab UCLA MEDICAL CENTER CLINICAL LABORATORY
10833 LECONTE AVENUE; LOS ANGELES, CA 90095-1713

Misc Test (Chem) Results 20 NG/ML Final
Misc Test (Chem) Normal (NOTE) Final
Values: Reference Range : 30 - 80 ng/mL
Deficiency : Less than 20ng/mL
Insufficiency : 20 - 29 ng/mL
Optimum Level : 30 - 80 ng/mL
This test measures both 25-hydroxy vitamin D2 and D3

Beta hCG
Ordered: 04/16/2015 18:20
Requested By: BREED, WYNNE (MD (R))

Anc ID: H43000
Collected: 04/16/2015 18:20

Order ID: 001DKPML
Resulted: 04/16/2015 20:01
1 or more Final Results Received

Reference Range

Beta hCG [MIU/ML] Final

<1
REFERENCE RANGES FOR BETA HCG (MIU/ML):
Healthy, non-pregnant individuals typically have low (<5 mIU/mL [IU/L]) to undetectable HCG levels, however, hCG can rise to detectable levels in peri- and post-menopausal women. (Gronowski, 2008) HCG results between 5 mIU/mL and 25 mIU/mL may be indicative of early pregnancy but should be interpreted in light of the total clinical presentation of the patient. (Tietz, 2006)

PREGNANCY:

Result Indicator: L = Low, H = High, A = Abnormal

Page: 3

RESP'T APP 0460

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

0-2 WEEKS 0-500
 2-3 WEEKS 100-1000
 3-4 WEEKS 500-6000
 1ST TRIMESTER 5000-200000
 2ND TRIMESTER 5000-50000
 3RD TRIMESTER 5000-50000

Comprehensive Metabolic Panel	Anc ID: H43000	Order ID: 001DKPMXM
Ordered: 04/16/2015 18:20	Collected: 04/16/2015 18:20	Resulted: 04/16/2015 19:52
Requested By: BREED, WYNNE (MD (R))		1 or more Final Results Received

		<u>Reference Range</u>	
Sodium	142	[135-145 MEQ/L]	Final
Potassium	3.7	[3.3-4.8 MEQ/L]	Final
Chloride	111	[101-111 MEQ/L]	Final
CO2	25	[25-34 MEQ/L]	Final
Electrolyte Balance	6	[2-12 MEQ/L]	Final
Glucose	87	[70-115 mg/dL]	Final

Normal Fasting Glucose: <100 mg/dl
 Impaired Fasting Glucose: 100-125 mg/dl
 Provisional DX of diabetes(must be confirmed) > 125 mg/dl.

BUN	9	[8-26 mg/dL]	Final
Creatinine	0.7	[0.5-1.3 mg/dL]	Final
Calcium	9.2	[8.4-10.2 mg/dL]	Final
Protein, Total	6.4	[6.1-8.2 G/DL]	Final
Albumin	3.7	[3.2-5.5 G/DL]	Final
Alkaline Phosphatase	58	[26-110 IU/L]	Final
AST	47	H [8-40 IU/L]	Final
ALT	19	[0-60 IU/L]	Final
Bilirubin, Total	1.4	[0.0-1.4 MG/DL]	Final

Thyroid Cascade	Anc ID: H43000	Order ID: 001DKPMXQ
Ordered: 04/16/2015 18:20	Collected: 04/16/2015 18:20	Resulted: 04/16/2015 20:01
Requested By: BREED, WYNNE (MD (R))		1 or more Final Results Received

		<u>Reference Range</u>	
TSH	2.10	[0.50-5.00 uIU/mL]	Final

Hematology

CBC With Diff	Anc ID: F84242	Order ID: 001DKPVJQ
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 07:24
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

Result Indicator: L = Low, H = High, A = Abnormal

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

White Blood Cell Count	6.7	[4.0-10.5 THOUS/MCL]	Final
RBC	4.71	[3.70-5.00 MILL/MCL]	Final
Hemoglobin	14.7	[11.5-15.0 G/DL]	Final
Hematocrit	42.4	[34.0-44.0 %]	Final
MCV	90.1	[81.5-97.0 FL]	Final
MCH	31.2	[27.0-33.5 PG]	Final
MCHC	34.7	[32.0-35.5 G/DL]	Final
RDW-CV	13.2	[11.6-14.4 %]	Final
Platelet Count	246	[150-400 THOUS/MCL]	Final
Neutrophils	4.5	[2.0-8.1 THOUS/MCL]	Final
	67%		
Lymphocyte	1.7	[0.9-3.3 THOUS/MCL]	Final
	25%		
Monocyte	0.5	[0-0.8 THOUS/MCL]	Final
	7%		
Eosinophil	0.0	[0-0.5 THOUS/MCL]	Final
	1%		
Basophil	0.0	[0-0.2 THOUS/MCL]	Final
	0%		
RBC Morphology	NO RBC ABNORMALITIES DETECTED BY AUTOMATED ANALYSIS.		Final
Plt Morph/Comm	DIFFERENTIAL PERFORMED BY AUTOMATED ANALYSIS. NO PLATELET ABNORMALITIES DETECTED BY AUTOMATED ANALYSIS.		Final

Glycated Hgb, A1C	Anc ID: F84242	Order ID: 001DKPVJT
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 09:37
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

Glycated Hgb, A1C	4.7	[4.6-6.0 %]	Final
Reference values for HgA1C:			
High risk for future diabetes ("prediabetes"): 5.7 - 6.4%			
Diabetes mellitus: = or >6.5%			
Target goal for most diabetics: <7.0%			
per ADA guidelines and recommendations, 2010			

Sedimentation Rate	Anc ID: F84242	Order ID: 001DKRPBR
Ordered: 04/17/2015 06:00	Collected: 04/17/2015 06:00	Resulted: 04/17/2015 14:41
Requested By: ROCHA, EVITA (MD (R))		1 or more Final Results Received

Reference Range

Sedimentation Rate	10	[0-20 MM/HR]	Final
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CBC With Diff	Anc ID: H43000	Order ID: 001DKPMXK
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Result Indicator: L = Low, H = High, A = Abnormal

Page: 5 **RESP'T APP 0462**

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Ordered: 04/16/2015 18:20

Collected: 04/16/2015 18:20

Resulted: 04/16/2015 19:13

Requested By: BREED, WYNNE (MD (R))

1 or more Final Results Received

		<u>Reference Range</u>	
White Blood Cell Count	8.4	[4.0-10.5 THOUS/MCL]	Final
RBC	4.61	[3.70-5.00 MILL/MCL]	Final
Hemoglobin	14.4	[11.5-15.0 G/DL]	Final
Hematocrit	41.9	[34.0-44.0 %]	Final
MCV	91.0	[81.5-97.0 FL]	Final
MCH	31.2	[27.0-33.5 PG]	Final
MCHC	34.3	[32.0-35.5 G/DL]	Final
RDW-CV	13.5	[11.6-14.4 %]	Final
Platelet Count	236	[150-400 THOUS/MCL]	Final
Neutrophils	5.4	[2.0-8.1 THOUS/MCL]	Final
	65%		
Lymphocyte	2.1	[0.9-3.3 THOUS/MCL]	Final
	25%		
Monocyte	0.8	[0-0.8 THOUS/MCL]	Final
	9%		
Eosinophil	0.0	[0-0.5 THOUS/MCL]	Final
	1%		
Basophil	0.0	[0-0.2 THOUS/MCL]	Final
	0%		
RBC Morphology	NO RBC ABNORMALITIES DETECTED BY AUTOMATED ANALYSIS.		Final
Plt Morph/Comm	DIFFERENTIAL PERFORMED BY AUTOMATED ANALYSIS. NO PLATELET ABNORMALITIES DETECTED BY AUTOMATED ANALYSIS.		Final

Microbiology

MRSA Screen

Anc ID: H43401

Order ID: 001DKPTWN

Ordered: 04/16/2015 22:10

Collected: 04/16/2015 22:10

Resulted: 04/18/2015 11:09

Requested By: BOTA, ROBERT (MD (A))

1 or more Final Results Received

		<u>Reference Range</u>	
Specimen Description	NARES		Final
Special Information	NONE		Final
Culture Results	NEGATIVE for METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS NEGATIVE for Methicillin susceptible STAPHYLOCOCCUS AUREUS		Final
Report Status	FINAL 04/18/2015		Final

Result Indicator: L = Low, H = High, A = Abnormal

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RESP'T APP 0463

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Serology

Syphilis Antibody Screen

Ordered: 04/17/2015 06:00

Requested By: ROCHA, EVITA (MD (R))

Anc ID: FB4242

Collected: 04/17/2015 06:00

Order ID: 001DKPVJZ

Resulted: 04/18/2015 13:53

1 or more Final Results Received

Reference Range

Treponema pallidum
Antibody

Final

NONREACTIVE

NO TREPONEMA PALLIDUM ANTIBODIES DETECTED

(NOTE)

A reactive result indicates that antibody is present in the sample as a result of previous or present infection with T. pallidum. All reactive ELISA results will be tested by the Rapid Plasma Reagin test (RPR). Those with a reactive RPR will be titrated to determine the level of anti-cardiolipin antibodies, a result that subsequently can be used to assess the response to therapy. Patients with a reactive ELISA and nonreactive RPR results will be tested with the T. pallidum particle agglutination (TP-PA) assay. If the TP-PA is nonreactive the most likely explanation is that the ELISA was a false positive. A new specimen can be submitted in 2-4 weeks for testing. If the TP-PA is reactive the patient most likely has been treated in the past for syphilis. However, treatment is indicated unless a history of treatment exists.

A nonreactive result indicates that no, or undetectable antibody levels are present in the sample, but does not rule out a recent or current infection. In case of suspicious primary syphilis recollect and retest 2-4 weeks later.

An equivocal result indicates that a low level of antibody is detected, and the patient should be monitored for antibody status. A second sample should be collected 2-4 weeks later and tested for any change in antibody response.

Result Indicator: L = Low, H = High, A = Abnormal

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RESP'T APP 0464

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#:

Visit#:

Dr: NGUYEN, KELVIN TRONG

Service: IP Medicine C

Gender: F

DOB:

Age: 19y

Admit Date: 04/18/2015

Discharge Date: 04/17/2015

Result Indicator: L = Low, H = High, A = Abnormal

Page: 8

RESP'T APP 0465

LAB RESULTS UPDATE - Page 8 of 9	UNIVERSITY OF CALIFORNIA IRVINE	Printed: 05/13/2015 07:32
Patient: REED, EMILY	MR#: [REDACTED]	Discharged: 04/17/2015 Service: 2015-04/17/2015
Copy for: ROI MGT GODOYJI	REQ: 4070657, DET: 21932563 IK: 65307833 ITK: 26882 EK: 99123645 VER: 1	RL 000042

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: NGUYEN, KELVIN TRONG
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/16/2015
Discharge Date: 04/17/2015

Cocaine (300 ng/mL), Methadone (300 ng/mL),
MDMA (500 ng/mL), Opiates (300 ng/mL),
PCP (25 ng/mL), Propoxyphene (300 ng/mL),
THC (100 ng/mL).

UA Urines

Urinalysis with Microscopic, Random Urine
Ordered: 04/16/2015 15:44
Requested By: BREED, WYNNE (MD (R))

Anc ID: H42641
Collected: 04/16/2015 15:44

Order ID: 001DKNPCZ
Resulted: 04/16/2015 16:14
1 or more Final Results Received

		<u>Reference Range</u>	
Urine Sample Site, UA	URINE, CLEAN CATCH		Final
Color, UA	YELLOW		Final
Clarity, UA	CLOUDY		Final
Urine Specific Grav, UA	1.018	[1.003-1.030]	Final
pH, UA	5	[5.0-8.0]	Final
Protein, UA	30	A [NEG MG/DL]	Final
Glucose, UA	NEGATIVE	[NEG MG/DL]	Final
Ketones, UA	20	A [NEG MG/DL]	Final
Bilirubin, UA	NEGATIVE	[NEG]	Final
Hemoglobin, UA	SMALL	A [NEG]	Final
Leukocyte Esterase, UA	NEGATIVE	[NEG]	Final
Nitrite, UA	NEGATIVE	[NEG]	Final
Urobilinogen, UA	<2	[<2.0 MG/DL]	Final
RBC, UA	4	H [0-3 #/HPF]	Final
WBC, UA	<1	[0-5 #/HPF]	Final
WBC Clumps, UA	NONE	[NONE #/HPF]	Final
Bacteria, UA	FEW	A [NONE]	Final
Amorphous Crystal, UA	MODERATE	[/HPF]	Final
Squamous Epithelial, UA	1	[0-10 /HPF]	Final
Mucous, UA	MODERATE	A [NONE /LPF]	Final

Result Indicator: L = Low, H = High, A = Abnormal

Page: 9

RESP'T APP 0466

UC Irvine Health
101 The City Drive | Orange, CA 92668
Results Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COX'AHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

CT Scans

Head w/o Contrast CT
Ordered: 04/17/2015 19:14
Requested By: GLASSY, MATTHEW SCOTT (MD (R))

1 or more Final Results Received
Resulted: 04/17/2015 19:44
Org Performed: RADNET

Head w/o Contrast CT

Final Updated

Examination: 70450 CT Head or Brain without Contrast
Report

EXAM: CT Head or Brain without Contrast

INDICATION: Altered mental status

EXAM DATE: 4/17/2015 7:08 PM

COMPARISON: None

TECHNIQUE: CT of the head without intravenous contrast.

Radiation Dose Information:

This patient received a total of 1 exposure event(s) during this CT examination. The CT DIvol and DLP radiation dose values for each exposure are:

Exposure: 1; Series: 2; Anatomy: Head; Phantom: 16 cm; CT DIvol: 55; DLP: 1133

The dose indicators for CT are the volume Computed Tomography (CT) Dose Index (CT DIvol) and the Dose Length Product (DLP), and are measured in units of mGy and mGy-cm, respectively. These indicators are not patient dose, but values generated from the CT scanner acquisition factors. The report includes radiation exposure data for exposures received during this examination. If multiple reports are produced from this examination, the exposure data is duplicated in each report. The exposure data reported is indicative, but not determinative, of the radiation dose received by this patient.

FINDINGS:

There is no evidence of acute intracranial hemorrhage, extra-axial collection, mass effect, midline shift, herniation or hydrocephalus. The ventricles, sulci and cisterns are age appropriate. The gray-white differentiation is intact. The visualized paranasal sinuses and mastoid air cells are clear. The surrounding soft tissues and osseous structures are unremarkable.

IMPRESSION:

1. No evidence of acute intracranial hemorrhage, mass effect or

RESP'T APP 0467

UC Irvine Health
101 The City Drive | Orange, CA 92868
Results Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COXAHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

Patient Name: REED, EMILY
MRN: [REDACTED]

hydrocephalus.

END IMPRESSION:
***** Final *****

Dictated by: Nguyen, Huan, M.D. 04/17/2015
7:28 pm
Electronically Signed by: Goyenechea, Martin, M.D. 04/17/2015
7:38 pm

Page 2 of 2

RESP'T APP 0468

Page: 2



CONFIDENTIAL PATIENT INFORMATION

Discharge Instructions - Inpatient

REED, EMILY

18y

F

COX AHERN, SUSAN

T5BD-08 Medical Telemetry

Admission/Discharge Dates

Admission Date: 04-17-2015

Discharge Date: 04-18-2015

Discharge Attending

Attending, COX AHERN, SUSAN, DO (A), Hospital Medicine

Primary Care Provider/Other Providers

Admitting, NGUYEN, KELVIN TRONG, MD (A), Hospital Medicine

PCP, DEBOLD, LORI ANN, MD, Peds: General

Referring, BOTA, ROBERT, MD (A), Psychiatry

Discharge Diagnoses

1. Drug-induced dystonia , Code: 333.72
2. TACHYCARDIA
3. History of schizophrenia , Description: History of schizophrenia , Code: V11.0

Discharge Information/Instructions

- Discharge Disposition: transfer to inpatient psychiatric facility...
- Condition at Discharge: stable
- Rehab Potential full self care
- Discharge Order/Treatment Plan see above summary

Questions Regarding Prescriptions

Consumer Med Safety web address For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>

Follow Up Appointments

Follow Up Appointments: Follow up with your primary care provider

Special Instructions/Safety Measures

For patients with Heart Failure, please weigh yourself as soon as you get home and every morning. Call your regular doctor or cardiologist with a weight gain of 3 pounds in a day or 5 pounds in a week. This may signal too much fluid and worsening of your Heart Failure.

04/18/2015 11:23

Page: 1 of 3

JobID: 10902255 / PROD
Printed from T5 Medical Telemetry

DISCHARGE INSTRUCTIONS - Page 1 of 3		UNIVERSITY OF CALIFORNIA IRVINE		Printed: 05/13/2015 07:32	
Patient: REED, EMILY		MRN: [REDACTED]		Discharged: 04/18/2015	
Copy for: ROI MGT GODOYJ1		REQ: 4070657, DET: 21932523 IK: 65092962 ITK: 20904 EK: 97543269 VER: 1		PL 000046	



Discharge Instructions - Inpatient

REED, EMILY

18y

F

COX AHERN, SUSAN

T5BD-08 Medical Telemetry

Medication List

Discharge Medications

- FLUoxetine 20 mg oral tablet
Instructions: 2 tab(s) orally once a day

Last dose taken: UNKNOWN and Next dose due at: _____

- diphenhydRAMINE 25 mg oral tablet
Instructions: 1 tab(s) orally every 8 hour

Last dose taken: 4/18/2015 0614 and Next dose due at: 4/18/2015 1400

For more information about safe medication practices, please visit: <http://www.consumermedsafety.org/>.

For Your Safety

Please check with your primary physician if you should take any medications(s) not on this list.

Keep a complete list of the medications you take with you at all times.

Provide a copy to your primary care provider and at each care visit.

Update your medication list with every change.



UC Irvine Health

CONFIDENTIAL PATIENT INFORMATION

Discharge Instructions - Inpatient

REED, EMILY

18y

F

COX AHERN, SUSAN

T5BD-08 Medical Telemetry

If your insurance company requires authorization for follow up care, please call them before making an appointment.

For information regarding advanced directive, call the California Health Decisions in Orange.

For information regarding health education classes, call toll free 877-UCI-DOCS.

To request an appointment or prescription renewal, view your health records, and contact your physician through myHealthcare, visit <https://myhealthcare.healthcare.uci.edu/PPU/Anonymous/Login.aspx>.

Return to nearest emergency room right away for chest pain, worsening stomach pain, trouble breathing, dizziness when standing, trouble walking or thinking. For other symptoms, if you are unable to reach your doctor, see the doctor in the UCI Medical Center Emergency Room.

Please notify your physician or emergency department nurse of persistent redness, swelling, pain or numbness at the site of a previous IV.

If you smoke, now is the time to quit. Call 1-877-UCI-DOCS for free stop smoking classes.

Physician Signature: _____, MD

Instructions given by: Carla Kain RN, RN Interpreter: _____

4/18/2015 11:30

PATIENT: I have received a copy of these instructions and I understand the information and my responsibility for on-going care needs.

Patient - Emily Reed

OTHER RESPONSIBLE PERSON _____

After you leave the hospital you will receive a survey. Your feedback is the most important way for us to judge how we are doing. If your health care and service needs were met we encourage you to reward us with a score of 5 on the survey questions. You may also provide specific written comments if you wish to do so.

Idai

34/18/2015 11:23

20150418 11:23

Page: 3 of 3

RESP'T APP 0471
Printed from: 75 Medical Telemetry

Printed: 05/13/2015 07:32

DISCHARGE INSTRUCTIONS - Page 3 of 3	UNIVERSITY OF CALIFORNIA IRVINE	PL 000048
Patient: REED, EMILY	MRN: [REDACTED]	Discharged: 04/18/2015
Copy for: ROI MGT GODOYJ1	REQ: 4070657, DET: 21932525 IK: 65092962 ITK: 20904 EK: 97543271 VER: 1	Service Code: 04/18/2015-04/18/2015

EEG REPORT

DATE OF TEST: 04/17/2015

REFERRING PHYSICIAN: Kelvin Trong Nguyen, MD(R)

CLINICAL HISTORY: This is an 18-year-old young lady with a history of PTSD presenting after an episode of tachycardia and agitation. She was rolling around at school, hearing voices and apparently shaking on the bus. The patient has major depression and psychotic features.

MEDICATIONS: Haldol.

TECHNIQUE: This is a routine inpatient 22-channel digital EEG recording using the Nihon-Kohden system with disk electrodes placed according to the 10/20 international system with a single EKG, 2 additional T1-T2 scalp electrodes, and 2 EOG channels. Activation procedures included mental activation and noxious stimulation, hyperventilation and photic stimulation as needed.

STATE: Awake.

RESULTS: Normal study.

1. During awake state with eyes closed, well-developed 11-12 hertz alpha rhythm was seen in the posterior head regions, waxing and waning, and reactive to eye opening. Drowsiness and stage II sleep were not achieved.
2. No epileptiform abnormality was identified.
3. Activation procedures were not performed.
4. The single lead EKG tracing showed regular rhythm at about 108 beats per minute.

IMPRESSION: Normal awake study. No potentially epileptogenic abnormality was identified. The diagnosis of epilepsy remains a clinical one.

Electronically Signed by
Mona Sazgar 04/20/2015 02:20 P

Mona Sazgar MD(A)
Dept. of Neurology
Associate Clinical Professor
Comprehensive Epilepsy Program

cc: Kelvin Trong Nguyen
Mona Sazgar

2002319 -- 651885185 / DD: 04/17/2015 04:41 P / DT: 04/17/2015 05:12
P

RESP'T APP 0472

EEG - Page 1 of 1 Part 1/1	UNIVERSITY OF CALIFORNIA IRVINE	Printed: 05/17/2015 07:32
Patient: REED, EMILY	MR#: [REDACTED]	Discharged: 04/18/2015 Service Dates: 04/17/2015-04/17/2015
Copy for: ROI MGT GODOYJ1	REQ: 4070657, DET: 21932527 IK: 65081537 ITK: 22856 EK: 97505555 VER: 1	PL 000049

REED, EMILY

MR#:

Gender: Female

Admit Date: 04/17/2015 12:10

Visit#:

DOB:

Discharge Date: 04/18/2015 12:30

DR: COX AHERN, SUSAN

Age: 18y

Service: IP Medicine C

H&P-Primary-Med: General

04/17/2015 12:41

GLASSY, MATTHEW SCOTT (MD (R))

Evaluation and Admission Date:

- Evaluation Date and Time: 04-17-2015 12:41
- Admission Date: 04-17-2015

Chief Complaint and History of Present Illness:

- **History of Present Illness:** This is an 18 year old female history of depression with psychotic features and previous SI, PTSD who presents from inpatient psychiatry after a rapid response call for tachycardia. Patient was initially BIBA to psychiatry after she was found agitated at school and rolling around on the asphalt at her high school (Marina at bedtime. Please see psych H&P for details but she was apparently "shaking" on the bus on way to school, stating that she heard voices and she wanted to go to the hospital. She then laid in the fetal position for 35 min on the ground screaming and stating that she wanted to hurt herself. She was given haldol IM and versed in ambulance on the way to the hospital. She was given haldol again at 1050 am this am. These may have been her first haldol doses for her.

Per chart she has been feeling increasing anxiety at school recently. There is also apparently a case against a man who has been sexually abusing her. In psychiatry today she was noted to become dystonic with L side flexure and tachycardic to 160s. A rapid response was called and she is transferred to inpatient telemetry. On my evaluation patient is non verbal but eyes open, able to follow commands and write her subjective. Currently she reports L side occiput pain. Also reports bilateral leg pain. Denies any neck pain, visual disturbances, hearing changes. No other pain elsewhere.

Past History:**Past Medical History:**

- History of depression: Description: History of depression
- History of anxiety: Description: History of anxiety
- History of schizophrenia: Description: History of schizophrenia
- Social anxiety disorder:
- Chronic post-traumatic stress disorder:
- Major depressive disorder:
- Psychiatric: anxiety; depression; schizophrenia

Allergies & Intolerances:**Allergies:**

- No Known Allergies:

Home Medications:

- FLUoxetine 20 mg oral tablet: 2 tab(s) orally once a day

Social History:

- Smoking Status: never smoker
- Frequency of Alcohol Intake: never
- Substance Use: none
- Other: 13 yo brother with MDD,

Review of Systems:

- Unable to Obtain Due To: acute delirium or psychosis

RESP'T APP 0473

Page: 1

REED, EMILY

MR#: [REDACTED]
 Visit#: [REDACTED]
 DR: COX AHERN, SUSAN

Gender: Female
 DOB: [REDACTED]
 Age: 18y

Admit Date: 04/17/2015 12:10
 Discharge Date: 04/18/2015 12:30
 Service: IP Medicine C

H&P-Primary-Med: General

04/17/2015 12:41

GLASSY, MATTHEW SCOTT (MD (R))

Vital Signs:

• Vitals: Temp 37.1, BP 133/77, satng 98%, 16 respiratory rate

Physical Exam:

• Exam: GEN: non verbal with eyes open, follows commands, No respiratory distress
 HEENT: Normocephalic/atraumatic, Pupils equal and reactive to light and accomodation bilaterally, extraocular movements are intact, no scleral icterus. MMM.
 NECK: Dystonic with contracture to L, Supple, Range of motion limited to L due to pain, no lymphadenopathy. No Jugular Venous Distention. No thyromegaly
 HEART: tachycardic, noraml S1S2
 LUNGS: Clear to auscultation bilaterally, No wheezes, Rales, or ronchi
 ABD: Soft, nontender, nondistended, +bowel sounds x 4, no organomegaly appreciated. No masses. No rebound. No CVA Tenderness.
 EXT: No edema. PPP 2+ distally throughout.
 SKIN: Clean/dry/intact
 NEURO: CN II-XII intact but poor participation, L side increased tone. She does have discordant free extremity movement such as scratching her head and rubbing her nose but only with her right hand. Sensation intact throughout. Increased tone in bilateral lower extremities.

Assessment and Plan:

• Assessment and Plan: # Acute dystonia with L side predominant contracture. She did receive a couple of doses of haldol with last one this am prior to her dystonia. It is unclear if she has received haldol previously. She is awake and participatory in exam, doubt meningitis or other intracranial event. Doubt seizure but possible. Possibly psychosis as well on the differential.

- benadryl IV now
- obtain lactate, prolactin (for seizure)
- CPK, ESR, CRP
- basic labs
- CT head/neck if doesn't respond to benadryl
- hold anti dopaminergic medications for now

Depression with psychotic features

- will discuss with psychiatry
- continue 5150 hold

FEN

- reg diet

prophylaxis

- ambulate

FULL CODE

- Attending Attestation: I was present with the resident/fellow during the history and exam. I discussed the case with the resident/fellow and agree with the findings and plan as documented by the resident/fellow. My additions or revision are included in the record.

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
DR: COX AHERN, SUSAN

Gender: Female

DOB: [REDACTED]

Age: 18y

Admit Date: 04/17/2015 12:10

Discharge Date: 04/18/2015 12:30

Service: IP Medicine C

H&P-Primary-Med: General

04/17/2015 12:41

GLASSY, MATTHEW SCOTT (MD (R))

- **Attending Comments/Additional Findings/Exceptions:** EPS due to haldol versus psychogenic dystonia. No seizures, normal EEG, exam minimal cogwheeling and felt the patient was resisting my passive movement of her left upper extremity. Symptoms responded to benadryl. Had similar episode to abilify. Stable for transfer to psychiatry for further care.

Attending Attestation:

- **Attending Evaluation Date and Time:** 04-18-2015 11:00

Billing:

- **Billing Service Level:** not applicable

Electronic Signatures:

COX AHERN, SUSAN (DO (A)) (Signed 04-19-2015 13:01)

Authored: Note Completion, Attending Attestation, Billing

GLASSY, MATTHEW SCOTT (MD (R)) (Signed 04-17-2015 13:10)

Authored: Evaluation and Admission Data, Chief Complaint and History of Present Illness, Past History, Allergies & Intolerances, Home Medications (Outpatient Medication Review), Social History, Review of Systems, Vital Signs, Physical Exam, Data Review, Assessment and Plan

Last Updated: 04-19-2015 13:01 by COX AHERN, SUSAN (DO (A))

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COX AHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

Chemistry

Magnesium	Anc ID: S60623	Order ID: 001DKSHCY
Ordered: 04/18/2015 06:10	Collected: 04/18/2015 06:10	Resulted: 04/18/2015 07:56
Requested By: TIEN, CONNIE (MD (R))		1 or more Final Results Received

	<u>Reference Range</u>	
Magnesium	1.7	L [1.8-2.5 mg/dL] Final

Phosphorus	Anc ID: S60623	Order ID: 001DKSHDF
Ordered: 04/18/2015 06:10	Collected: 04/18/2015 06:10	Resulted: 04/18/2015 07:56
Requested By: TIEN, CONNIE (MD (R))		1 or more Final Results Received

	<u>Reference Range</u>	
Phosphorus	3.2	[2.5-4.6 MG/DL] Final

Comprehensive Metabolic Panel	Anc ID: S60623	Order ID: 001DKSHDW
Ordered: 04/18/2015 06:10	Collected: 04/18/2015 06:10	Resulted: 04/18/2015 07:56
Requested By: TIEN, CONNIE (MD (R))		1 or more Final Results Received

	<u>Reference Range</u>	
Sodium	142	[135-145 MEQ/L] Final
Potassium	3.5	[3.3-4.8 MEQ/L] Final
Chloride	110	[101-111 MEQ/L] Final
CO2	24	L [25-34 MEQ/L] Final
Electrolyte Balance	8	[2-12 MEQ/L] Final
Glucose	77	[70-115 mg/dL] Final

Normal Fasting Glucose: <100 mg/dl
 Impaired Fasting Glucose: 100-125 mg/dl
 Provisional DX of diabetes(must be confirmed) > 125 mg/dl.

BUN	8	[8-26 mg/dL] Final
Creatinine	0.5	[0.5-1.3 mg/dL] Final
Calcium	8.5	[8.4-10.2 mg/dL] Final
Protein, Total	5.8	L [6.1-8.2 G/DL] Final
Albumin	3.3	[3.2-5.5 G/DL] Final
Alkaline Phosphatase	53	[26-110 IU/L] Final
AST	45	H [8-40 IU/L] Final
ALT	22	[0-60 IU/L] Final
Bilirubin, Total	1.1	[0.0-1.4 MG/DL] Final

CK	Anc ID: S60623	Order ID: 001DKSHFH
Ordered: 04/18/2015 06:10	Collected: 04/18/2015 06:10	Resulted: 04/18/2015 07:56
Requested By: TIEN, CONNIE (MD (R))		1 or more Final Results Received

Result indicator: L = Low, H = High, A = Abnormal

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RESP'T APP-0476

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COX AHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

Chemistry

			<u>Reference Range</u>	
CK	823	H	[22-269 U/L]	Final

Lactic Acid	Anc ID: F85762	Order ID: 001DKRGKR
Ordered: 04/17/2015 13:42	Collected: 04/17/2015 13:42	Resulted: 04/17/2015 14:29
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

			<u>Reference Range</u>	
Lactic Acid	0.9		[0.7-2.1 mmol/L]	Final

Prolactin	Anc ID: F85762	Order ID: 001DKRGKY
Ordered: 04/17/2015 13:42	Collected: 04/17/2015 13:42	Resulted: 04/18/2015 10:40
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

			<u>Reference Range</u>	
Prolactin	26	H	[0-24 NG/ML]	Final

C Reactive Protein	Anc ID: F85762	Order ID: 001DKRNMN
Ordered: 04/17/2015 13:42	Collected: 04/17/2015 13:42	Resulted: 04/17/2015 14:33
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

			<u>Reference Range</u>	
C Reactive Protein	<0.5		[0-0.7 MG/DL]	Final

CK	Anc ID: F85762	Order ID: 001DKRNMS
Ordered: 04/17/2015 13:42	Collected: 04/17/2015 13:42	Resulted: 04/17/2015 14:33
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

			<u>Reference Range</u>	
CK	1378	H	[22-269 U/L]	Final

Hematology

Sedimentation Rate	Anc ID: F85762	Order ID: 001DKRNMQ
Ordered: 04/17/2015 13:42	Collected: 04/17/2015 13:42	Resulted: 04/17/2015 14:41
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

			<u>Reference Range</u>	
Sedimentation Rate	14		[0-20 MM/HR]	Final

Microbiology

Result Indicator: L = Low, H = High, A = Abnormal

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Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COX AHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

Microbiology

Bacterial Culture Urine Quantitative	Anc ID: S60994	Order ID: 001DKTFLV
Ordered: 04/18/2015 06:13	Collected: 04/18/2015 06:13	Resulted: 04/19/2015 10:50
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

Reference Range

Specimen Description	URINE, CLEAN CATCH	Final
Special Information	NONE	Final
Culture Results	> 100,000 COLONIES/ML GRAM POSITIVE ROD resembling Lactobacillus species > 100,000 COLONIES/ML DIPHTHEROIDS (2 MORPHOTYPES) Multiple organisms present in urine, possible contamination	Final
Report Status	FINAL 04/19/2015	Final

MRSA Screen	Anc ID: F86502	Order ID: 001DKRDZN
Ordered: 04/17/2015 17:47	Collected: 04/17/2015 17:47	Resulted: 04/18/2015 21:38
Requested By: NGUYEN, KELVIN TRONG (MD (A))		1 or more Final Results Received

Reference Range

Specimen Description	NARES	Final
Special Information	NONE	Final
Culture Results	NEGATIVE for METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS NEGATIVE for Methicillin susceptible STAPHYLOCOCCUS AUREUS	Final
Report Status	FINAL 04/18/2015	Final

UA Urines

Urinalysis with Reflex to Culture, Random Urine	Anc ID: S60915	Order ID: 001DKRGLF
Ordered: 04/18/2015 06:13	Collected: 04/18/2015 06:13	Resulted: 04/18/2015 06:34
Requested By: GLASSY, MATTHEW SCOTT (MD (R))		1 or more Final Results Received

Reference Range

Urine Sample Site, UA	URINE, CLEAN CATCH	Final
Color, UA	YELLOW	Final
Clarity, UA	HAZY	Final
Urine Specific Grav, UA	1.020 [1.003-1.030]	Final
pH, UA	5 [5.0-8.0]	Final
Protein, UA	30 A [NEG MG/DL]	Final
Glucose, UA	NEGATIVE [NEG MG/DL]	Final
Ketones, UA	NEGATIVE [NEG MG/DL]	Final

Result Indicator: L = Low, H = High, A = Abnormal

UC Irvine Health
Department of Pathology & Laboratory Medicine | Edwin S. Monuki, M.D., Ph.D. and Associates
101 The City Drive, Orange, CA 92868
Laboratory Result Report

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
Dr: COX AHERN, SUSAN
Service: IP Medicine C

Gender: F
DOB: [REDACTED]
Age: 19y

Admit Date: 04/17/2015
Discharge Date: 04/18/2015

Bilirubin, UA	NEGATIVE		[NEG]	Final
Hemoglobin, UA	LARGE	A	[NEG]	Final
Leukocyte Esterase, UA	TRACE	A	[NEG]	Final
Nitrite, UA	NEGATIVE		[NEG]	Final
Urobilinogen, UA	<2		[<2.0 MG/DL]	Final
RBC, UA	110	H	[0-3 #/HPF]	Final
WBC, UA	34	H	[0-5 #/HPF]	Final
WBC Clumps, UA	NONE		[NONE #/HPF]	Final
Bacteria, UA	FEW	A	[NONE]	Final
UA Culture	URINE SENT TO MICROBIOLOGY FOR CULTURE			Final
Squamous Epithelial, UA	3		[0-10 /HPF]	Final
Mucous, UA	MANY	A	[NONE /LPF]	Final

Result Indicator: L = Low, H = High, A = Abnormal

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RESP'T APP 0479

PL 000056

REED, EMILY

MR#: [REDACTED]
Visit#: [REDACTED]
DR: BOTA, ROBERTGender: Female
DOB: [REDACTED]
Age: 18yAdmit Date: 04/18/2015 12:31
Discharge Date: 04/20/2015 16:13
Service: IP Mental Health Adult Med

ATS Progress Note-PSYCH-recreational therapy

04/20/2015 11:32

LARSON, JAN (CTRS)

Group/Patient Attendance:

- Group type recreational therapy
- Group topic Leisure Education 'Uno Card Game'
- Patient attendance attended

Group Assessment/Intervention(s):

- Cognition/Perception impaired insight; impaired judgement
- Mood anxious; depressed; pleasant; skeptical
- Affect anxious; blunted; flat; guarded
- Thought Process poverty of thought
- Speech soft
- Barriers anxiety; severity of illness
- Psychomotor Activity slow
- Group Interventions encourage participation; provide counseling and support; provide education; structured activity

Group Evaluation:

- Participation active participation
- Offered for 45-60 minutes
- Patient response active
- Interpersonal responsive to interaction; appropriate self disclosure; appropriate social interaction; showed empathy

Plan of Care:

Problem/Goals/Intervention

Long Term Goals (04/20/2015 10:32):

Demonstrates absence of inappropriate behavior prior to discharge; Symptoms no longer interfere with daily functioning;

Problems:

Mood Disorder (04/20/2015 10:32):

Short term goals: Participates appropriately in milieu for 8 hr intervals; Patient identifies one positive coping skill to decrease suicide ideation;

Interventions: Provide positive reinforcement that patient is worthwhile; Assist patient with identifying positive aspects of life;

Thought Disorder (04/20/2015 10:32):

Short term goals: Able to hold topic conversation/remain engaged in activity; Patient states recognition of visual hallucinations, auditory hallucinations, olfactory hallucinations, or delusional thought;

Interventions: Redirect patient with reality testing when needed; Assess for perceived symptoms;

Electronic Signatures:

LARSON, JAN (CTRS) (Signed 04-20-2015 11:34)