

A30B62A
HEARING **DECEMBER 10, 2009**

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
4 COUNTY DEPARTMENT - PROBATE DIVISION

5 In Re -the Estate of,

6 Mary G. Sykes, No. 09 P 4585

7 An Alleged Disabled.

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10 REPORT OF PROCEEDINGS of the above-entitled
11 cause held at the Richard J. Daley Center, Courtroom
12 1814, Chicago, Illinois, before the HONORABLE
13 MAUREEN E. CONNORS, Judge of said Court, at
14 11:00 o'clock a.m. on Thursday, December 10, 2009.

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FILE NO.: A30B62A

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1 MR. WALLER: Harvey Jack Waller on behalf of
 2 Petitioner, Daughter Carolyn Toerpe.
 3 THE COURT: Sir, you are?
 4 MR. STERN: Adam Stern, S-t-e-r-n, one of
 5 the guardian ad litem.
 6 THE COURT: Mr. Stern.
 7 MS. JOYCE: I'm Colleen Joyce. We'll be
 8 filing our additional appearance on behalf of the
 9 daughter Gloria Sykes.
 10 THE COURT: The spelling of your last name?
 11 MS. JOYCE: J-o-y-c-e.
 12 THE COURT: All right. Counsel, you are?
 13 MR. JOYCE: Kevin Joyce. We're related.
 14 THE COURT: As -- sister and brother?
 15 MR. JOYCE: Husband and wife and partners,
 16 yes.
 17 THE COURT: So you're asking for leave to
 18 file an appearance on behalf of --
 19 MR. JOYCE: That's correct.
 20 THE COURT: Is there any objection?
 21 MR. WALLER: I don't believe it's an
 22 additional appearance, there's no appearance on file.
 23 MR. JOYCE: Is that right? I wasn't sure
 24 how you handled the last hearing.

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1 THE COURT: How do you spell your last name?
 2 MR. MADERER: M-a-d-e-r-e-r.
 3 THE COURT: Okay. Thank you, Mr. Maderer.
 4 MR. EVANS: I'm Scott Evans, I've known Mary
 5 Sykes, Carolyn Sykes, Gloria Sykes, our mother
 6 introduced us to them in 1995.
 7 THE COURT: Thank you, sir.
 8 GLORIA SYKES: Gloria Sykes, Mary Sykes's
 9 daughter.
 10 THE COURT: Is that everybody now?
 11 So what do we have today, Ladies and
 12 Gentlemen?
 13 MR. STERN: Judge, we're calling -- a
 14 hearing on the care plan was last week and for
 15 guardianship and the original CP 211 was not available
 16 and I believe counsel has it now.
 17 MR. WALLER: I went to the Doctor's house
 18 and got it.
 19 THE COURT: His house?
 20 MR. WALLER: Yes, that's where we had to go.
 21 THE COURT: You do what you have to do. All
 22 right, so I would have made the appointment on the last
 23 date, but we didn't have the doctor's report.
 24 MR. STERN: That's correct. Now we have the

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1 THE COURT: He withdrew his, so you want to
 2 file your appearance, okay, fine. Leave to file is
 3 granted, thank you.
 4 Counsel, I'm sorry.
 5 MS. DENISON: JoAnne Denison, and I have a
 6 motion pending to file my appearance and it was denied
 7 the last time.
 8 THE COURT: Okay, thank you.
 9 Madame?
 10 MS. TOERPE: Carolyn Toerpe, Mary Sykes's
 11 daughter.
 12 THE COURT: How's your mother?
 13 MS. TOERPE: Very well.
 14 THE COURT: Good, glad to hear it.
 15 Sir?
 16 MR. TOERPE: Fred Toerpe.
 17 THE COURT: Thank you.
 18 MS. PORTO: Patti Porto, P-o-r-t-o, Catholic
 19 Charities.
 20 THE COURT: Thank you, Ms. Porto.
 21 Sir, you are -- back here?
 22 MR. MADERER: I'm Charles Maderer and I own
 23 a home directly behind the Sykes's house and I've known
 24 Charles and Mary for 30 years.

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1 original, we only had copies before.
 2 THE COURT: Do you have the order appointing
 3 and the bond?
 4 MR. STERN: The bond and the temporary
 5 guardian, and we have an order, your Honor. I don't
 6 think the dates are filled in yet.
 7 THE COURT: All right. Yes, put the name
 8 of the document, the date, guardian ad litem have no
 9 objection, put their names in there as well.
 10 I'm trying to find the bond here. I got a
 11 \$6000 bond, is that sufficient?
 12 MR. WALLER: It's income pretty much.
 13 There's maybe \$4000 in assets and inventory plus real
 14 estate.
 15 THE COURT: All right, then.
 16 MR. JOYCE: That's not included, the real
 17 estate?
 18 MR. WALLER: No, it does not.
 19 THE COURT: Well, get the order ready. You
 20 folks review it --
 21 MR. JOYCE: We've got a couple of
 22 administrative issues to bring up. We've got three
 23 motions, Judge, and I'd like to serve them today.
 24 THE COURT: Is your appearance on file?

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2 (Pages 2 to 5)

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| <p>1 MR. JOYCE: No, it's not. 2 THE COURT: Okay, get it on file, and then 3 you want to file what now? 4 MR. JOYCE: Three separate motions. A 5 motion to vacate the 11-18 order and a motion to 6 terminate the guardianship and a motion to appoint 7 Ms. Sykes as guardian of the person and another sister 8 as guardian of the estate, and I do have all the motions 9 prepared. 10 THE COURT: I'd like to see, especially the 11 motion to terminate. I didn't even make a ruling yet, 12 I'm about to make the ruling and sign the order. 13 So you want me to terminate something -- 14 MR. JOYCE: It was temporary and permit, so 15 at this point it would just be to terminate the 16 temporary. 17 THE COURT: Well, the temporary becomes moot 18 on the signing of the plenary -- 19 MR. JOYCE: Correct. 20 THE COURT: So let's get this order entered. 21 MR. JOYCE: I'm sorry to throw all this at 22 once, Judge. Our appearance now will be filed to try to 23 calm what I have seen, what I reviewed so far to be a a 24 pretty extensive history of this file. We will do our</p> | <p>1 THE COURT: So what time to what time? 2 MR. JOYCE: 3:00 o'clock to 8:00 o'clock. 3 THE COURT: How would she get to and from? 4 MR. JOYCE: Ms. Sykes. 5 GLORIA SYKES: I would pick her up and bring 6 her home -- back to Carol's house. 7 MR. WALLER: I saw the plan, this is the 8 first time it's been brought up in front of the bench. 9 We were, you know, outside in the hall talking and no 10 one brought it up. 11 THE COURT: It is what it is so -- okay. 12 MR. WALLER: I have to talk to my client 13 about that for a second. 14 THE COURT: You want to discuss it, sure. 15 Anything else other than the visitation? 16 MR. JOYCE: There is -- I believe that 17 Ms. Denison wanted 304 language in the order denying her 18 representation of Ms. Sykes, I don't know if that's an 19 issue with that, and then I guess if it is appealed, 20 then I would represent Ms. Sykes in anything that is 21 determined to be a conflict and she would I guess if -- 22 THE COURT: It's this lady's order, right? 23 MR. JOYCE: That's correct. 24 THE COURT: So do you want the 304 language,</p> |
| <p>Page 6</p> <p>1 best to make sure that this is done smoothly. We 2 just -- we have motions that we believe should be filed. 3 THE COURT: Again, a motion to terminate 4 an order I haven't even entered yet, but okay. 5 MR. JOYCE: A couple of other things, 6 Judge -- 7 THE COURT: Do we have longer to get this 8 order ready -- 9 MR. STERN: I'm checking dates. 10 MR. JOYCE: Can I bring up a couple of other 11 things? 12 THE COURT: Sure. 13 MR. JOYCE: Gloria Sykes was not able to see 14 her mom on Thanksgiving and I don't know if you want a 15 written motion to this effect, but we were hoping we 16 could get some kind of visitation schedule for the 17 Christmas dates. 18 THE COURT: All right, what do you think 19 about that? 20 So what would you like? 21 MR. JOYCE: Can we do that now? 22 THE COURT: Yes. What do you want, the time 23 and days and all that, what do you want? 24 MR. JOYCE: Christmas dinner.</p> | <p>1 Madame? 2 MS. DENISON: Yes, I'd like that. The last 3 time we were in hallway, the guardian ad litem told me 4 is that if you were setting for an evidentiary hearing, 5 they would want 60 days for discovery, which means that 6 I couldn't even appear on the case for probably three or 7 four months from today and I would rather just take the 8 604 language and say -- a final order, subject to 9 appeal, and appeal it because four months from today, 10 you know -- 11 THE COURT: All right, whatever. You want 12 the 304 language -- I don't know if you folks talked 13 about this? 14 MR. STERN: The order was presented, I 15 signed the order on Tuesday or Monday afternoon, it 16 was -- they all initialed the order, it was an agreed 17 order. The United ruling gave them leave to set up for 18 an evidentiary hearing, we set parameters for that. 19 Ms. Denison and Ms. Sykes both signed off on the order. 20 Now it's to amend an order which they haven't even 21 discussed with us and again bringing up for the first 22 time -- 23 THE COURT: There is an agreement to amend 24 it, they --</p> |

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1 MS. DENISON: No, there wasn't. I didn't
2 sign --

3 THE COURT: Either there is agreement -- can
4 we talk one at a time?

5 If there's agreement to amend an order from
6 all parties that were involved or you file a motion to
7 amend it, Counsel, that's all there's to it. If you
8 want to talk to these folks, maybe get some agreement, I
9 don't know. It's the first time they're hearing it, I
10 guess so -- I don't know.

11 MR. JOYCE: Object to the 304 language --

12 THE COURT: Call them up, find out what they
13 want to do.

14 MR. JOYCE: We do have these three other
15 motions, could we set a briefing schedule?

16 THE COURT: I want to see them. Once I
17 enter this order, it's not even ripe yet. I'll deny it
18 on its face right now, it's not even ripe, I didn't even
19 sign this order yet. So can we wait until we get this
20 done?

21 MR. JOYCE: Then, Judge, if that's where
22 you're leading, I think what I'll do is --

23 THE COURT: Counsel, you're asking me to
24 vacate an order that I haven't seen yet.

1 STATE OF ILLINOIS)
2)SS.
3 COUNTY OF C O O K)
4
5 DAVID J. DEMSKI, being first duly sworn on oath
6 says that he is a court reporter doing business in the
7 City of Chicago; that he reported in shorthand the
8 proceedings given at the taking of said hearing on the
9 10th day of December, 2009, and that the foregoing is a
10 true and correct transcript of his shorthand notes so
11 taken as aforesaid, and contains all the proceedings
12 given at said hearing.
13
14

15 DAVID J. DEMSKI - CSR# 084-004386
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Page 12

1 MR. JOYCE: I'll notice them up.
2 May I prepare an order as well, Judge?
3 MR. STERN: Reflecting what?
4 MR. JOYCE: Reflecting that I was granted
5 leave to appear and the visitation with respect to
6 Christmas.
7 THE COURT: Well, again, we're not agreed
8 yet, we're here to discuss it. If you want to discuss
9 with your client, if those parameters are fine, say I'm
10 fine, something about Christmas, that would be fine. We
11 can discuss that today. So let's pass it.
12 MR. JOYCE: Okay.
13 THE COURT: Very good.
14 (The hearing concluded
15 at 11:30 o'clock a.m.)
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4 (Pages 10 to 12)

April 30, 2009

Dr. Patel,

In an effort to assist Mom, Mary Sykes, I am requesting you fill out the attached form and return it to me at my fax number (630) 759-6365. As this is of a confidential nature, please let me know when you will be faxing the form back, by calling me at (630) 679-3436 or e-mailing me at toerpecm@vvsd.org, when you are doing so.

I request this be held in confidence between the two of us. If you have any questions or Mother needs to come in for an examination before her scheduled appointment on May 18th at 3:40, please call me at the above phone number so we can discuss your concern. I need this form to be filled out as soon as it is possible.

Thanking you in advance,

Carolyn M. Toerpe *Carolyn Toerpe*
Mary's Daughter
POA on Medical

Pramod M. Patel, M.D.
7447 W TALCOTT AVENUE, SUITE 216
CHICAGO, IL 60631

PATIENT: Mary Sykes

DATE OF EVALUATION: January 26, 2009

Weight: 100 pounds

BP: 124/60

Pulse: 90 and regular

SUBJECTIVE: The patient is here for her routine three-month check-up. Per daughter ever since her hearing was checked and she received hearing aids, her dementia seems to have improved and they have taken her off the Excelon patch about a month ago. Another problem they had was that Excelon patch was making her "mean" especially towards evening. No chest pains or palpitations.

OBJECTIVE: Appearance and affect are normal. The patient is more jovial and response much better because she cannot hear better. A 90-year-old walks independently, but per daughter has a tendency to fall and she needs to be held especially when she is going for longer walks. Neck: No palpable nodes or bruits. No distended veins. CVS: Heart rhythm is regular. No S3. Lungs are clear. CNS: No motor deficits. No focal signs. The patient is not oriented to the year, the month, or the date. Cannot recall the president's name. Knows she is in the doctor's office and the location. She lives in Chicago, but does not know the county. Able to recognize objects and respond verbally.

ASSESSMENT:

1. Hypertension.
2. Hearing impairment with new hearing aids now.
3. The patient still has some degree of dementia.

PLAN: CPM with Toprol-XL 25 mg and asa 81 mg. Discussed with daughter that I will play "by ear" and that will respond for medication for dementia based on family's perception of how she is doing over the next three months. ROV three months.

Pramod M. Patel, M.D.

PMP/RG/bip

D: 01/26/09

T: 01/28/09

1/30/09 T-L: Gloria - I called when Excelon patch was asked for. Per daughter, memory is worse, goes to hospital & doesn't know why she is there. Recent Excelon 4-long patch # 3610 due to be worn soon. A

22

Pramod M. Patel, M.D.
7447 W TALCOTT AVENUE, SUITE 216
CHICAGO, IL 60631

PATIENT: Mary Sykes

DATE OF EVALUATION: May 08, 2009

Weight: 103 pounds

BP: 144/70

Pulse: 78 and regular

SUBJECTIVE: The patient was brought here primarily at my request for an evaluation as the daughter, Carolyn Toerpe, had requested for me to fill out a form that would basically say that the patient was totally or partially incapable of making personal and financial decisions. Carolyn was called today and the patient was brought to the office by the other daughter, Gloria, and she insisted on being present in the room and it was okay with the mother. As regards hypertension, the patient denied any chest pains or palpitations, but was getting short of breath with exertion according to Gloria. The patient did agree to this. There was no orthopnea or PND.

B. Patel
OBJECTIVE: Appearance is normal. Affect is normal. The patient is very hard of hearing. According to Gloria, the patient has lost \$6000 worth of hearing aids. The patient does not know why she is here and thinks she was here just a month ago whereas she was really here on January 26, 2009. Mini-mental score of 18/30 was achieved. Activities of daily living at home are normal. The patient goes out for a walk on her own and does not get lost, although she has got lost in the past while coming to the office or going back from the office to home. According to the daughter, the patient goes to the bank by herself. The patient claims she handles the chequebook whereas Gloria ~~disagreed~~ with that. CNS: Cranial nerves are intact. There is no motor deficit. CVS: Heart rhythm is regular. No S3. No murmur. Lungs: Clear. Neck: No carotid bruits.

ASSESSMENT:

1. Uncontrolled hypertension with episodes of shortness of breath.
2. Dementia with the score of 18 on the MMSE.

PLAN: DC Toprol-XL. Start Zestril 5 mg daily. When Gloria found out that this mental incompetence form needed to be filled out, there was some commotion in the room and in the waiting room and she asked me not to fill that form out. Mother did not understand all this and she was asking me what she should do and I suggested to her that she go and talk to her attorney and we will follow whatever the instructions are through the attorney. Recheck for the uncontrolled hypertension and change of medication in one month's time.

Pramod M. Patel, M.D.

PMP/JK/JP

D: 05/08/09

T: 05/11/09

NEUROPSYCHOLOGICAL AND REHABILITATION CONSULTANTS

CONSULTATION IN CLINICAL, REHABILITATION AND NEUROPSYCHOLOGY

TOBY G. MOTYCKA, PSY. D.
CLINICAL NEUROPSYCHOLOGIST

NEUROPSYCHOLOGICAL EVALUATION

| | | | |
|---------------|-----------------|----------------|--------------------|
| Name: | Mary Sykes | Date Of Birth: | January 5, 1919 |
| Sex: | Female | Age: | 90 years |
| Handedness: | Right | Education: | 2 years of College |
| Date of Test: | August 10, 2009 | | |

REASON FOR REFERRAL

Mary Sykes was referred by Dr. Patel for a neuropsychological evaluation to assess general neuropsychological functioning related to decision making capacity and increased cognitive decline.

BACKGROUND INFORMATION

Mary Sykes is a 90 year old female who has diagnoses of dementia and high blood pressure. She completed two years of college and worked as a seamstress for both George Young and Company, and privately. She has two sisters and two daughters, Gloria and Carolyn and her husband passed away on April 5, 1998. She resides alone in a two flat in Chicago with one of her daughters, Gloria living above her. Her daughter Carolyn lives in Naperville with her family. Gloria apparently took Ms. Sykes to court to obtain an order of protection against Carolyn, her sister and Ms. Sykes other daughter. When questioned about this Ms. Sykes had no awareness of the incident and did not recall it at all. After further questioning she did recall going to court. She was asked about the order of protection and did not understand why it would have been requested. She commented, "She (Gloria) wanted to manage everything, I said, No, you're mostly out (later clarifying that Gloria travels often)". She said, "I signed something, I don't remember what or what it was for". When asked about her daughter Carolyn's involvement, she said, "They (including her husband) help out with appointments, any bills they pay it for me, I think my daughter's name is on it, that's how I want it, my other daughter is on the go, here today gone tomorrow".

Several statement made were suggestive of confusion. She was asked what she did for fun at home and said she goes for a walk around the block or plays baseball with her family. Her daughter Carolyn did not know what she was referring to. She also said she cooks on her own pays her own bills, washes windows inside and out, mows the lawn, does her own gardening and grocery shopping. None of this is true.

Ms. Sykes was appropriately dressed and adequately groomed. She was hard of hearing and wore hearing aids. If there was any question about her hearing a question, it would be repeated and her reduced hearing did not interfere with testing. On formal measures of depression and anxiety, she denies denied symptoms of both. This is believed to be an accurate and reliable estimate of Mary Sykes' neuropsychological status at this time. Please refer to her medical record for additional background information.

TESTS ADMINISTERED

Clinical Interview

Repeatable Battery for the Assessment of Neuropsychological Status (RBANS)

Dementia Rating Scale

Trail Making A and B

Stroop Color Word Test

Controlled Oral Word Association Test

Clock Drawing

Independent Living Scale

Beck Depression Inventory

Beck Anxiety Inventory

NEUROPSYCHOLOGICAL TEST RESULTS

GENERAL COGNITIVE FUNCTIONING

Mary Sykes was administered the RBANS as an overall measure of neuropsychological functioning. She achieved the following score with 100 being average:

| INDEX | INDEX SCORE | PERCENTILE |
|---------------------------|-------------|------------|
| Immediate Memory | 49 | <1% |
| Visuospatial/Constructual | 89 | 23% |
| Language | 71 | 3% |
| Attention | 60 | 4% |
| Delayed Memory | 40 | <1% |
| Total Score | 54 | <1% |

Mary achieved a Total Score of 54, which falls below the first percentile, within the severely impaired range. This total score is much lower than her estimated premorbid intellectual functioning. She demonstrates significantly impaired verbal learning. On list learning, she demonstrated very low performance on her initial trial with a subsequently flat learning curve over trials, with little to no improvement after four trials. On story memory she performed similarly being able to only recall three of 24 bits of information on two trials. Mary had some

difficulty copying a complex figure and missed several of the details. She was unable to recall any of it on delayed recall. She was unable to recall any of the words from the list read to her and none of the story on delayed recall. Mary also has poor recognition memory having trouble discriminating target words from distractor words. Her delayed memory score of 54 reflects her poor verbal learning and memory and her lack of ability to retain this information over time. Visualspatial skills were within the low average range, one point below the average range. She had some difficulty with her visual spatial perception and judgment of line orientation on a page. Language was moderately impaired with slightly low confrontational naming. Verbal fluency and naming objects on demand was within the impaired range showing several perseverations of previous responses. Attention was also moderately impaired in her ability to attend to number sequences and in relation to her psychomotor speed of pairing numbers to symbols. Mary demonstrated slow sequencing and poor divided attention with increased disorganization with more complex tasks. Planning and problem solving were concrete and disorganized.

Mary Sykes was administered the Dementia Rating Scale as a measure of her overall level of cognitive functioning. She achieved an overall score of 95, which falls below the cutoff for dementia, which is 123. The only scores, which fell above the cutoff were attention and construction. All other scaled scores fell below the cutoff. These include the following scales: Initiation/Perseveration, Conceptualization and Memory. She was able to sequence a series of 4 digits forward and 3 digits backward. She was able to follow single commands, but had some difficulty with two-step and multi-step commands. There were no signs of language errors upon gross examination and she spoke clearly but with limited verbal fluency. She was moderately impaired in her ability to generate words on command and response initiation was poor. There were several signs of perseveration noted during verbal fluency tasks. Mary was able to perform double alternating hand movements without difficulty. There were no errors on basic design construction and copying simple designs and figures.

On tasks of conceptualization, she had minimal difficulty seeing similarities and differences between related and unrelated items in a visual format. Within a verbal format she was very concrete and unable to think abstractly or show flexibility in her approach. Mary was oriented to her name and date of birth but not the current date. She did not know the President of the United States, the Governor of Illinois or Mayor of Chicago. She knew her location. Visual scanning showed errors of omission.

Short-term memory was assessed through several measures. On the DRS, she was given two sentences to remember and after 5 minutes, she could not recall either of the sentences. Verbal repetition was good however her ability to immediately identify words she just read four times was very poor and just above chance level. Simple visual matching was intact but immediate visual memory was mildly impaired.

Mary Sykes was administered the Independent Living Scale which is a test of independent living skills. It measures various domains and looks at ones ability to function at an independent level a dependent level or at an assisted living level. Scores falling above a standard score of 50 are

indicative of independent living. Scores below 40 are in the dependent level and scores between 40 and 50 are within the assisted living range. Mary Sykes achieved the following subscales:

| Subscales | Score | Range |
|----------------------------------|-------|-----------------|
| Memory/Orientation | 20 | Dependent |
| Managing Money | 26 | Dependent |
| Managing Home and Transportation | 35 | Dependent |
| Health and Safety | 26 | Dependent |
| Social Adjustment | 43 | Assisted Living |

| Factor Scales | Score | Range |
|-------------------------|-------|-----------|
| Problem Solving | 28 | Dependent |
| Performance/Information | 29 | Dependent |

On the Memory/Orientation subscale she was able to state her telephone number and address but could not say what day of the week it is. She also could not recall a missing item from a grocery list or recall a specific item removed from a group of items presented to her after a few minutes. She was also unable to recall a specific doctor's appointment given to her to remember. In the Managing Money section she said her income tax return needs to be filed by June. She was given two bills to pay and checks to write out for payment. This first bill to the Telephone Company was written out to the Gas Company despite her initially saying it was a telephone bill. The second bill was actually for the Gas Company for \$32.50. She read the bill and said it if for the Gas Company and then said, "How much should I pay them, I think \$125.00" and proceeded to write out the check for \$125.00 while the bill in front of her had the amount due reading \$32.50. She was also unable to calculate the amount she would owe for a \$350. medical bill that was paid at 80%. She said her part that would be due was \$4. Within Managing Home and Transportation she was able to respond appropriately to many of the questions but when asked to provide two examples of what she would do in various situations she was only able to provide one. There were two examples of her not understanding the question and even after re-explanation she was unable to grasp what was being asked. Under the heading of Health and Safety she also gave either a single answer when two were asked for or a less desirable correct response. When asked how she could remember to take medication three times a day she said have a relative call her each time. For many of the answers she said she would walk to the fire department, which is apparently a few doors down from her home. While this may be a correct response to many questions, she defaulted to it rather than come up with a better solution. Her responses to Social Adjustment were within the assisted living range primarily due to giving less than complete responses to questions.

This results in a Full Scale Standard Score of 60. The Full Scale score is based on a range of scores in which scores above 100 are in the independent living range, below 85 are in the dependent living and between 85 and 100 are in the independent living range. Her Full Scale Standard Score of 60 falls within the dependent living range.

Mary was administered self-report measures of depression and anxiety and denied symptoms of each.

SUMMARY and RECOMMENDATIONS

Mary Sykes is a 90 year-old female who presents with declining cognition, impaired short-term memory and poor decision making. She has been making decisions and signing papers without awareness of what she is signing or what the consequences are. She will later have no recollection of what she had done.

Neuropsychological testing reveals poor learning and memory for both immediate and delayed recall and she does not retain information over time. She has impaired initiation, conceptualization, attention/concentration and language. She is concrete in her ideation and unable to think abstractly. Her mood is reported to be within normal limits and she is denying symptoms of depression at this time. Her decision making capacity is compromised due to her inability to retain complex verbal information over time and shift focus from one task to another, making it very difficult to weigh options and make informed decisions. This does not mean that she cannot make simple decisions but she is not likely to consider alternative viewpoints or various options to those directly presented to her. Her Independent Living Skills indicates a dependent need in the areas of Memory/Orientation Managing Money, Home and Transportation and Health and Safety. Problem Solving Performance/Information and her overall score fall within the dependent range as well.

Her performance on neuropsychological testing is consistent with a dementia. She presents with significantly impaired new learning and memory, which is more impaired than other areas of cognition. Her abstract reasoning, concept formation, and decision making ability deficits are most suggestive of a dementia of the Alzheimer's type, however there were no medical records available at the time of testing and this diagnosis should be considered a working diagnosis until her physician can consider any treatable causes of dementia or cognitive impairment.

Due to background information, behavioral observations and these test results it is recommended that guardianship be considered. Given the expectations of increasing care needs and her lack of awareness of cognitive decline, Ms. Sykes will need a greater level of care as time goes on.

DSM IV DIAGNOSES

Axis I 294.8 Dementia NOS, likely of the Alzheimer's type

Axis II: V71.09 No Diagnosis on Axis I

Axis III: High blood pressure, others per medical record.

Thank you for this referral.

Toby G. Motycka, Psy.D.

Clinical Neuropsychologist

IL License # 071-004052

Pramod M. Patel, M.D.
7447 W TALCOTT AVENUE, SUITE 216
CHICAGO, IL 60631

PATIENT: Mary Sykes

DATE OF EVALUATION: January 26, 2009

Weight: 100 pounds

BP: 124/60

Pulse: 90 and regular

SUBJECTIVE: The patient is here for her routine three-month check-up. Per daughter ever since her hearing was checked and she received hearing aids, her dementia seems to have improved and they have taken her off the Excelon patch about a month ago. Another problem they had was that Excelon patch was making her "mean" especially towards evening. No chest pains or palpitations.

OBJECTIVE: Appearance and affect are normal. The patient is more jovial and response much better because she cannot hear better. A 90-year-old walks independently, but per daughter has a tendency to fall and she needs to be held especially when she is going for longer walks. Neck: No palpable nodes or bruits. No distended veins. CVS: Heart rhythm is regular. No S3. Lungs are clear. CNS: No motor deficits. No focal signs. The patient is not oriented to the year, the month, or the date. Cannot recall the president's name. Knows she is in the doctor's office and the location. She lives in Chicago, but does not know the county. Able to recognize objects and respond verbally.

ASSESSMENT:

1. Hypertension.
2. Hearing impairment with new hearing aids now.
3. The patient still has some degree of dementia.

PLAN: CPM with Toprol-XL 25 mg and asa 81 mg. Discussed with daughter that I will play "by ear" and that will respond for medication for dementia based on family's perception of how she is doing over the next three months. ROV three months.

Pramod M. Patel, M.D.

PMP/RG/bip

D: 01/26/09

T: 01/28/09

1/26/09 T-L: Gma - I called when Excelon patch was asked for. Per daughter, memory is worse, goes to bed & didn't know why she is here. Present Excelon 4-6mg patch + 3010 due to be seen soon. A