**PSY 625 Reply to Samantha’s post week 1 Discussion**

**Case 1**

Gary's case appears to lean towards two different areas. Gary could mean that he has people watching his every move, meaning that he is continuously being monitored to make sure that his grades remain on top of everything, or Gary could mean that he is actually hallucinating and seeing things that are not actually there. I would recommend that Gary see a psychiatrist for a medication evaluation to ensure that he does not actually need medication and then the psychiatrist could refer him to a psychologist if needed.  A psychiatrist will evaluate all of Gary's symptoms and can not only provide a brief amount of therapy but can make a medical diagnosis as well that may be able to be assisted with the help from some type of medication.

**Case 2**

In this case, I believe it would be more beneficial for Connie to see a psychologist in order to start some therapy services. It appears that Connie may be suffering from an "empty nest" for the first time and needs someone to simply debrief her thoughts to. It does not appear that Connie suffers from anything out of the ordinary (hallucinations, delusions, etc); therefore, seeing a psychologist first is the least drastic alternative and more referrals can be made from there if needed. If the psychologist believes that Connie suffers from severe anxiety, severe depression, or any other type of mental illness that could benefit from prescribed medication, a referral could then be made to a psychiatrist.

**Case 3**

James is an individual who was at one point physically fit and at the top of his game; however, he has had a major decline in his physical and mental state recently. James's symptoms include confusion, forgetfulness, and irritability. Given that James was found slumped over the steering wheel of his car, I would refer him to see a neurologist. James's symptoms appear to have come out of nowhere pretty rapidly. Given the rapid development of these symptoms, I believe it would be more beneficial for him to see a neurologist versus a psychiatrist, psychologist, or neuropsychologist in order to ultimately rule out any severe issues like a stroke, seizure disorder, brain tumor, etc (Carlson, 2017).

Carlson, N. R., & Birkett, M. A. (2017). [Physiology of behavior](https://ashford.instructure.com/courses/71460/external_tools/retrieve?display=borderless&url=https%3A%2F%2Fcontent.ashford.edu%2Flti%3Fbookcode%3DCarlson.0505.17.1) (12th ed.) [Custom edition]. Retrieved from https://content.ashford.edu