

21.8.24

J. Mackenzie

Break down yesterday. all too much for me.

M^o came to visit. She brought up moving so suddenly
+ how it will affect Lexy.

+ M^o wanting to file for custody
M^o putting partner down; saying I'm being manipulated
But I doubt in my mind.

We just married + having a baby + want to live together.

M^o said his odds are 50/50

But I love him; he makes me love.

M^o upset me so much. I ~~had to~~

I cried + q. my decisions. Do I really want to move?

So big; feel overwhelmed.

? your lawyer

- Want mediation without lawyers

- M^o wants to go through court.

Lexi's F^o push back + legal.

Meant to move on 7th

Wish it should let Lexi stay in her F^o till next year.

Qut's telling me to wait.

Due 2nd Dec.

Want to have baby in Bathurst.

④ Husband there to help.

2 minds as hadn't heard much about Bathurst Hospital
Jeremy been helpful w/ getting info

Lexi is 11.

told M^o she

She wants to stay here. Doesn't like Jeremy + doesn't want
to move.

Found letter from Lexi saying she her F^o said it was her
choice but M^o says I have to go w/ her.

→ v. upsetting

Rob been in Nicole 5 yrs; Lexi accepts her.

I've had 2 partners since.

She's getting older + making her own choices.

? If Lexi loves it her F^o

- I'd feel rejected;
- maybe I haven't done enough
- I'd miss her so much.
- she's staying to be with her friends
- she gets exhausted being with F^o, Nicole, then 2-6yo.

Don't feel like moving atm. ☺ be at home.

13/9 - 1 pm
25/9 - 2.15

K-10+

Patient or Client Identifier

Surname MACLENNIEOther names JESSICADate of Birth 11.01.1983

Gender

Male

Female ☒

Other

Address 11 Hughes St, Londonderry NS1 2TSDate completed: 21.8.24**Instructions**

The following ten questions ask about how you have been feeling in the **past four weeks**. For each question, mark the circle under the option that best describes the amount of time you felt that way.

		None of the time	A little of the time	Some of the time	Most of the time	All of the time
1.	In the past four weeks, about how often did you feel tired out for no good reason?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	In the past four weeks, about how often did you feel nervous?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	In the past four weeks, about how often did you feel so nervous that nothing could calm you down?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4.	In the past four weeks, about how often did you feel hopeless?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.	In the past four weeks, about how often did you feel restless or fidgety?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
6.	In the past four weeks, about how often did you feel so restless you could not sit still?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
7.	In the past four weeks, about how often did you feel depressed?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
8.	In the past four weeks, about how often did you feel that everything was an effort?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
9.	In the past four weeks, about how often did you feel so sad that nothing could cheer you up?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
10.	In the past four weeks, about how often did you feel worthless?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please turn over – there are a few more questions on the other side

The next few questions are about how these feelings may have affected you in the **past four weeks**. You need not answer these questions if you answered 'None of the time' to all of the ten questions about your feelings

11.	In the past four weeks, how many days were you TOTALLY UNABLE to work, study or manage your day to day activities because of these feelings?	8 (Number of days)
12.	[Aside from those days], in the past 4 weeks, HOW MANY DAYS were you able to work or study or manage your day to day activities, but had to CUT DOWN on what you did because of these feelings?	10 (Number of days)
13.	In the past 4 weeks, how many times have you seen a doctor or any other health professional about these feelings?	2 (Number of consultations)
14.	In the past 4 weeks, how often have physical health problems been the main cause of these feelings?	<input type="radio"/> None of the time <input type="radio"/> A little of the time <input checked="" type="radio"/> Some of the time <input type="radio"/> Most of the time <input type="radio"/> All of the time

Thankyou for completing this questionnaire.

Please return it to the staff member who asked you to complete it.

Professor Ronald C Kessler of the Department of Health Care Policy, Harvard Medical School is thanked for the use of research on the K10 funded by US Public Health Service Grants R01 MH46376, R01 MH52861, R01 MH49098, and K05 MH00507 and by the John D and Catherine T MacArthur Foundation Network on Successful Midlife Development (Gilbert Brim, Director).