



U.S. Department of Justice  
Federal Bureau of Prisons  
Federal Detention Center

33 NE 4<sup>th</sup> St.  
Miami, FL 33132

November 13, 2015

The Honorable James R. Klindt  
United States Magistrate Judge  
United States District Court  
Middle District of Florida  
Jacksonville Division  
Bryan Simpson U.S. Courthouse  
300 North Hogan Street  
Courtroom 3-D  
Jacksonville, FL 32202

Re: Name : Joshua Ryne Goldberg  
Reg. No: 63197-018  
Case No: 3:15-mj-01170-JRK

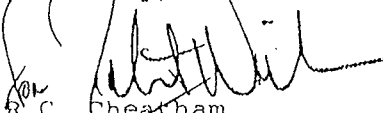
Dear Judge Klindt:

Thank you for referring Mr. Joshua Ryne Goldberg to us for an evaluation. In response to your Court Order, a competency evaluation of the defendant was completed at the Federal Detention Center, Miami, Florida. Enclosed are the results of the examination. Copies were mailed directly to Mr. Kevin C. Frein, Assistant United States Attorney, and to Mr. Paul A. Shorstein, the attorney for the defendant.

It is the opinion of our examiner that Mr. Goldberg suffers from a severe mental disorder which likely interferes with his rational understanding of the legal process, as well as the defendant's ability to assist his attorney in his own defense. Consequently, it is recommended that Mr. Goldberg be found incompetent to proceed with the legal proceedings and that he undergo competency restoration treatment at a more appropriate setting, such as a medical facility.

If you have any questions or concerns, please do not hesitate to contact the examiner, Dr. Lisa Feldman at (305) [REDACTED], or facsimile number (305) [REDACTED].

Sincerely,

  
R.C. Cheatham  
Warden

cc: Mr. Kevin C. Frein, AUSA  
Mr. Paul A. Shorstein, Atty. for Def.

UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF PRISONS  
FEDERAL DETENTION CENTER  
MIAMI, FLORIDA

FORENSIC EVALUATION

DEFENDANT NAME: Joshua Ryne Goldberg

REGISTRATION NUMBER: [REDACTED]

CASE NUMBERS: 3:15-mj-01170-JRK

DATE OF BIRTH: [REDACTED]

DATES OF EVALUATION: September to November of 2015

DATE OF REPORT: November 13, 2015

IDENTIFYING INFORMATION:

Mr. Joshua Ryne Goldberg is a 20-year-old, Caucasian male, referred by the United States District Court, Middle District of Florida, Jacksonville Division, for an evaluation under the provisions of Title 18, United States Code (USC), Section 4241. On September 16, 2015, the referring Court ordered the BOP to evaluate Mr. Goldberg's competency to stand trial. The defendant was designated on September 18, 2015 to the Federal Detention Center, Miami, Florida (FDC-Miami) for the evaluation and he arrived at the facility on September 28, 2015.

ASSESSMENT PROCEDURES:

The nature and purpose of the evaluation were explained to Mr. Goldberg during an initial psychological interview. He was informed of the limits of confidentiality and advised that the usual client/doctor privilege would not be in effect. Rather, it was explained to him that anything he discussed with the examiner might be relayed to the Court. Mr. Goldberg was informed that a written report summarizing test results and clinical findings would be provided to the Court, to his attorney, and to the prosecuting attorney. The defendant acknowledged those conditions, appeared to understand them, and agreed to cooperate with the parameters set forth by the examination procedures.

Mr. Goldberg's evaluation entailed a comprehensive review of all available documentation pertaining to his case. The following is a list, albeit not exhaustive, of the documents examined and sources that were consulted:

- 1 - Copies of medical records from [REDACTED]; various dates.
- 2 - Copies of correspondence from the defendant, various dates.
- 3 - Copies of the discovery regarding the defendant, various dates.
- 4 - Copy of Criminal Complaint, filed September 10, 2015.
- 5 - Copy of Order granting Defendant's Oral Motion for Competency Exam, dated September 16, 2015.
- 6 - Central, medical, and psychological records from the BOP, from September to November of 2015.
- 7 - Copy of Protective Order regarding the disclosure of certain discovery material, dated October 15, 2015.
- 8 - Monitored telephone conversations and electronic mail (e-mail) generated by the defendant, various dates.

Mr. Goldberg underwent psychological testing and procedures administered by Dr. Lisa Feldman and Ms. Iliana Jimenz, M.S., a psychology graduate student under Dr. Feldman's supervision. In addition, Mr. Goldberg was evaluated by Dr. Edda Aponte, Staff Psychologist. The following tests and procedures were administered to assess Mr. Goldberg's present level of functioning:

Clinical Interview  
Mental Status Examination  
Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2 RF)  
Structured Interview of Reported Symptoms, Second Edition (SIRS-2)  
Georgia Court Competency Test-Mississippi State Hospital (GCCT-MSH)  
The MacArthur Competence Assessment Tool-Criminal Adjudication (MacCAT-CA)

In addition, members of the FDC-Miami Correctional Services staff reported on the defendant's adjustment to his unit and incarceration in general. This collateral information was necessary in order to obtain a broader understanding of his adaptive and interpersonal skills.

BACKGROUND INFORMATION:

Background data was obtained from all of the sources listed above.

**Developmental History:** Mr. Goldberg indicated that he was born on [REDACTED] in Jacksonville, Florida. The defendant stated that he has three siblings and has been raised by his parents. The defendant denied a history of physical or sexual abuse during childhood.

**Educational History:** The defendant stated that he graduated from high school and completed some college. [REDACTED]

Mr. Goldberg was reportedly enrolled as a full-time student prior to the instant offense.

**Military History:** Mr. Goldberg denied any military history.

**Employment History:** The defendant denied ever holding an employment position.

**Social/Marital History:** Mr. Goldberg denied ever being married or fathering any children. [REDACTED]

**Substance Abuse History:** The defendant denied any history of alcohol or substance use.

**Medical History:** Mr. Goldberg stated that he has been treated [REDACTED]. The defendant denied a history of seizures, head injuries or loss of consciousness (LOC). A review of medical records also noted that he has been treated for [REDACTED]

**Psychiatric History:** [REDACTED]. A review of medical records revealed that Mr. Goldberg was first evaluated for mental health concerns [REDACTED]

**Criminal History:** Mr. Goldberg denied any previous criminal history.

**EVALUATION FINDINGS:**

**Behavioral Observations:** Overall, Mr. Goldberg functioned poorly in the highly structured environment of the institution. Upon his arrival to the FDC-Miami on September 28, 2015, the defendant was evaluated by Edda Aponte, Psy.D., Staff Psychologist. Dr. Aponte placed the defendant on Suicide Watch due to Mr. Goldberg's report of suicidal ideation and mental health concerns. The defendant was released from Suicide Watch the following day by this author. Mr. Goldberg was subsequently housed in general population; however, the defendant continued to exhibit difficulties functioning in the institution.

**Current Mental Status:** The defendant is a 20-year-old, Caucasian male, who appears to be his stated age.

The defendant's manner of dress was appropriate, as he wore an inmate's uniform that is required in the institution. He displayed poor eye contact during clinical contacts. Mr. Goldberg was guarded, evasive, and subtly argumentative, during the evaluation procedures. His mood ranged from neutral to agitation when discussing his current legal situation and incarceration. The defendant exhibited incoherent thought processes. Mr. Goldberg evidenced

a perseverative and tangential thought process with strained logic. His thought content was remarkable for grandiosity and paranoid delusions, including delusions of persecution. Though the defendant was placed on Suicide Watch during the evaluation period, he denied any current suicidal/homicidal ideation, plan, or intent. He also denied experiencing any hallucinations and he did not appear to be responding or attending to internal stimuli. His memory functioning appeared intact for immediate, remote, and recent events, although appeared contaminated with persecutory interpretations.

His insight into his mental health and legal status was impaired. Moreover, his judgment as to cause and effect relations was poor. In addition, a review of BOP records prior to the defendant's arrival at the FDC-Miami demonstrated similar impaired functioning.

**Medical Evaluation, Studies, and Treatment:** Throughout the evaluation period, the defendant was treated for the following medical conditions: Asthma, Esophageal Reflux, and Staphylococcus.

**Psychiatric Treatment:** Mr. Goldberg was confined at a BOP facility in Tallahassee, Florida from September 22, 2015 to September 28, 2015. He arrived to that facility with a prescription of the antidepressant, levomilnacipran (Fetzima) 80 milligrams (mg.) at bedtime and clonidine (antihypertensive) .2 mg. daily. Due to BOP formulary restrictions, the former medication was discontinued, but the latter medication was continued. On September 28, 2015, the defendant arrived to the FDC-Miami. He was initially evaluated by Jose Gonzalez, M.D., Chief Psychiatrist at the FDC-Miami, on September 29, 2015 and was assigned diagnoses of "Anxiety state, unspecified" and "Depressive disorder, not elsewhere classified." Mr. Goldberg was re-evaluated by Dr. Gonzalez on October 6, 2015, who noted that the defendant exhibited paranoid delusions. Dr. Gonzalez assigned Mr. Goldberg an additional diagnosis of "Unspecified psychosis" and prescribed risperidone (antipsychotic) 1 mg. twice daily. The defendant's prescription of clonidine was discontinued at that time. On October 10, 2015, the defendant complained of adverse effects that were attributed to his prescription of risperidone, which was immediately discontinued. Medical records from October 12, 2015 noted that correctional staff reported that Mr. Goldberg was observed as "anxious and pacing the floor." The defendant was evaluated by medical staff and prescribed lorazepam (benzodiazepine/anxiolytic) 2 mg. one-time dosage. Several hours later, Mr. Goldberg was re-evaluated

by medical staff due to additional complaints of "body stiffness and vomiting" and prescribed lorazepam 2 mg. intramuscularly (IM) one-time dosage. On October 13, 2015, the defendant was evaluated by Dr. Gonzalez, during which Mr. Goldberg disclosed that he took "a pill from another guy who told me it was for sleep and it was a higher dose of Risperdal." The defendant continued to complain of multiple somatic problems and verbalizations of paranoid delusions. Mr. Goldberg was prescribed olanzapine (antipsychotic) 2.5 mg. in the evening, clonazepam (benzodiazepine/anxiolytic) .5 mg. three times daily for 15 days, and mirtazapine (antidepressant) 7.5 mg. in the evening. The defendant's last contact with Dr. Gonzalez occurred on November 10, 2015, during which Mr. Goldberg continued to report paranoid ideation and symptoms of anxiety. Dr. Gonzalez discontinued the defendant's prescription of mirtazapine and increased his prescription of olanzapine to 5 mg. in the evening. In addition, Dr. Gonzalez prescribed clonazepam .5 mg. in the evening for 10 days and citalopram (antidepressant) 20 mg. in the evening.

**Psychological Test Results:** Mr. Goldberg was administered an objective measure (MMPI-2 RF) of personality and psychiatric characteristics, which allows for a comparison of his scoring pattern to the scoring patterns of normal and psychiatric populations. This measure also detects deviations from candid responding. On the MMPI-2 RF, Mr. Goldberg's responses were reflective of over-reporting of severe psychological impairment and over-reporting of somatic symptoms as indicated by an assertion of a much larger than average number of somatic symptoms rarely described by individuals with genuine medical problems. In addition, Mr. Goldberg endorsed an unusual combination of responses that are associated with non-credible reporting of somatic and/or cognitive symptoms and non-credible memory complaints. The defendant's response style on this measure rendered the measure invalid for additional interpretation.

Mr. Goldberg was also administered the SIRS-2, a comprehensive measure designed to assess systematically deliberate distortions in self-reported psychiatric symptoms. On this measure, the defendant's overall response pattern did not indicate any increased likelihood of feigning a mental disorder.

Based on subjective clinical impressions, Mr. Goldberg exhibits disorganized thinking, significant social deficits, and poor interactions with others.

DIAGNOSTIC IMPRESSIONS AND CASE FORMULATION:

Unspecified Schizophrenia Spectrum and Other Psychotic Disorder, 298.9

Mr. Goldberg is a 20-year-old, Caucasian male, with an extensive documented history of mental health treatment [REDACTED]. At this time, the defendant has been assigned a diagnosis of Unspecified Schizophrenia Spectrum and Other Psychotic Disorder under the current diagnostic system of psychiatric disorders (Diagnostic and Statistical Manual of Mental Disorders-Fifth Edition/DSM-5).

During the current evaluation period, the defendant exhibited disorganized thoughts and behaviors. His thinking contained delusions of persecution, as well as delusions of grandeur, in which he evidences an exaggerated notion of his importance, power, or identity. The defendant also exhibited perseveration and tangentiality, which is an inability to have goal-directed associations of thought. Available records revealed that the defendant has been assigned numerous diagnoses ranging from Anxiety Disorders to Schizophrenia. Mr. Goldberg may meet the criteria for other diagnoses such as a personality disorder given his documented history of mental health treatment without any reported success. At this time, a more specific condition could not be discerned given his current unstable mental state. Therefore, this condition was rendered to communicate a degree of diagnostic uncertainty.

Based on the fact that Mr. Goldberg's presentation occurs in a medicolegal context, a diagnosis of Malingering was considered. The essential feature of Malingering, according to the DSM-5, is the intentional misrepresentation or exaggeration of physical or psychological symptoms, for gains such as receiving diminished legal ramifications. The results from one of the objective tests administered to Mr. Goldberg were invalidated due to over-reporting of symptoms. While it is possible that the defendant may be purposely exaggerating his mental health concerns due to his perception that he might avoid entirely, or receive diminished repercussions, for his alleged criminal behavior, the defendant has a well-documented history of mental health treatment that preceded the instant offense. Nonetheless, a classification of Malingering would not exclude the presence of a legitimate psychiatric condition. In fact, co-occurrence of malingering with a genuine condition is common and should be ruled out in subsequent evaluations.



TREATMENT RECOMMENDATIONS:

The defendant should be transferred to a federal medical center to undergo comprehensive, inpatient psychiatric assessment and treatment. He should continue to be administered psychotropic medications to address his psychiatric disturbances. All modalities of treatment should be mandated by the Court and subjected to monitoring. In addition, a comprehensive assessment should be conducted on the defendant to address any future risk that the defendant may pose to others.

PROGNOSIS:

Mr. Goldberg's prognosis is poor. The defendant evidences disordered thinking and poor insight. Moreover, he has an extensive documented history of mental health treatment which has reported to be unsuccessful.

OPINION ON THE ISSUE OF COMPETENCY:

The tests for competency are designed to assess the defendant in several areas of courtroom proceedings. These include testing his ability to understand the charges against him, his ability to assist defense counsel, and his ability to understand courtroom proceedings.

A careful review of the defendant's general court knowledge revealed a sufficient factual understanding of courtroom roles and proceedings, including an understanding of the roles of courtroom personnel. Mr. Goldberg stated that the judge "listens to the evidence and weighs the evidence" and that the jury "weighs the evidence that the lawyers present and decides whether guilty or not." The defendant provided the correct name of his attorney and appropriately stated that the role of the defense attorney is to "argue on my behalf." Mr. Goldberg also demonstrated an understanding of the adversarial nature of the courtroom proceedings by indicating that the role of the prosecutor is to "argue against me."

Mr. Goldberg was administered an objective measure (GCCT-MSH) designed to assess relevant psycho-legal knowledge. On this measure, the defendant obtained a score that is consistent with that of individuals deemed competent to stand trial. Furthermore, he did not endorse bizarre symptoms of mental illness in relation to his legal knowledge on this measure. Of note, this measure does not assess for a defendant's rational appreciation of the charges against him, or the ability to

appreciate his own legal situation. On another objective measure of psycho-legal knowledge and abilities related to competency to stand trial (MacCAT-CA), the defendant's scores suggested that he has a satisfactory comprehension of basic legal information. He obtained adequate scores, which measured his capacity to seek, identify, and balance significant legal information, and use this data to make decisions about his case. However, Mr. Goldberg scored in the Clinically Significant Impairment range in his ability to appreciate his own legal situation. The defendant's score on this portion of the test suggest that his appreciation of how he is likely to be treated in the course of adjudication, or his rational understanding of the proceedings against him, is adversely affected by symptoms of a mental disorder. Additionally, a review of the defendant's correspondence revealed that Mr. Goldberg maintains an inflated sense of his own abilities that do not appear to be functionally effective.

In conclusion, Mr. Goldberg is actively displaying symptoms of a mental disorder that severely impair his rational understanding of the legal proceedings against him. Furthermore, it is likely that his current mental state will interfere with his ability to assist towards his own defense. Therefore, it is recommended that Mr. Goldberg be found Incompetent to Stand Trial and that he undergo mandatory competency restoration treatment at a more appropriate setting, such as a medical facility.

*Lisa B. Feldman, Psy.D.*

Lisa B. Feldman, Psy.D.  
Forensic Psychologist