

Spring 2020

CE 650 Syllabus: Diagnosis and Psychopathology of Adults

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Winona State University Counselor Education Department CE 650: Diagnosis and Psychopathology of Adults Semester Hours: 3		
Course Location	This class is hybrid (online & live class meetings) Live class meeting schedules (Rochester Broadway Building 317): 5-8pm Thursdays: 1/23, 2/6, 2/20, 3/5, 3/26, 4/2, 4/16, 4/30	
Instructor	Rieko Miyakuni, Ed.D. LPC(IL), NCC	
Instructor Phone & E-Mail	507-457-5352 rieko.miyakuni@winona.edu	
Program Website	https://www.winona.edu/counseloreducation/	
Instructor Office Location	Helble Hall 348 GPS address: 101 E. 7 th St. Winona	
Instructor Office Hours:	Mondays: 11am – 1:30pm (Winona) & 3-5pm (Rochester) Wednesday: 2 – 5pm (Winona) Thursdays (1/23, 2/6, 2/20, 3/5, 3/26, 4/2, 4/16, 4/30): 2:30-5pm (Rochester) Any other Thursdays 3-5:30pm (Winona)	

I. COURSE DESCRIPTION

The purpose of this course is to introduce students to the etiology and classification of mental disorders as defined by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). Students will learn to utilize diagnostic information to conduct diagnostic interviews, conceptualize the presenting problem, and write diagnostic assessments in order to facilitate case management, treatment plan development, and therapeutic interventions with people seeking/receiving mental health counseling services. Instructional methodology will include lectures, case studies presented in class, diagnostic activities using dyadic and small group activities, and other instructional modalities designed to facilitate the learning process.

II. COURSE PREREQUISITES

Prerequisite: Admission to the CED Program. Grade only. Offered annually.

III. COURSE OBJECTIVES

1. Build an understanding of the basic principles of etiology, diagnosis, and treatment of mental and emotional disorders for adults.
2. Develop and demonstrate an understanding of the classification system used in the diagnosis of mental disorders.
3. Learn the diagnostic criteria for each of the categories of mental disorders.
4. Learn to make differential diagnoses.
5. Gain skills in developing and articulating clinical hypotheses of psychopathological behavior based on the assessment of behavioral and emotional data as well as mental status evaluation.
6. Learn to translate dysfunctional behavior, emotional disturbance and mental deficit into appropriate DSM categories.
7. Develop and implement appropriate treatment plans based on the gathering and synthesis of relevant information such as medical and mental health history, current symptoms, and assessment results.
8. Become familiar with managed care issues such as reimbursement, right to practice, access and privileges within the system.
- 9.
- 10.
- 11.
- 12.
- 13.

14. Examine the ethical, legal, and therapeutic considerations relevant to the practice of mental health counseling.
15. health counseling.
16. Consider the multicultural issues inherent in the practice of mental health counseling.

IV. COURSE REQUIRED TEXTS, RESEARCH BASE & TECHNOLOGY

Two Required Textbooks:

American Psychiatric Association (APA) (2013). *Diagnostic and statistical manual of mental disorders*, (5th ed.). Washington, DC: Author

Morrison, J. (2016). *DSM-5 Made easy: The clinician's guide to diagnosis*, (1st ed.). New York, NY: Guildford Press

Recommended:

- Additional materials and resources posted on the related course D2L page.

V. COURSE CONTENT AREAS

2009 COUNCIL FOR ACCREDITATION OF COUNSELING AND RELATED EDUCATIONAL PROGRAMS (CACREP) RELATED STANDARDS:

Section III – CLINICAL MENTAL HEALTH COUNSELING

FOUNDATIONS

1. Demonstrates the ability to apply and adhere to ethical and legal standards in clinical mental health counseling.
2. Applies knowledge of public mental health policy, financing, and regulatory processes to improve service delivery opportunities in clinical mental health counseling.

COUNSELING, PREVENTION, AND INTERVENTION

1. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.
2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.
3. Promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities.
4. Applies effective strategies to promote client understanding of and access to a variety of community resources.
5. Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling.
6. Demonstrates the ability to use procedures for assessing and managing suicide risk.
7. Applies current record-keeping standards related to clinical mental health counseling.
8. Provides appropriate counseling strategies when working with clients with addiction and co-occurring disorders.
9. Demonstrates the ability to recognize his or her own limitations as a clinical mental health counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

1. Maintains information regarding community resources to make appropriate referrals.
2. Advocates for policies, programs, and services that are equitable and responsive to the unique needs of clients.
3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.

ASSESSMENT

1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment

2. planning, with an awareness of cultural bias in the implementation and interpretation of
3. assessment protocols.
4. Demonstrates skill in conducting an intake interview, a mental status evaluation, a
5. biopsychosocial history, a mental health history, and a psychological assessment for treatment
6. planning and caseload management.
7. Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring
8. mental disorders.
9. Applies the assessment of a client's stage of dependence, change, or recovery to determine the
10. appropriate treatment modality and placement criteria within the continuum of care.

RESEARCH AND EVALUATION

1. Applies relevant research findings to inform the practice of clinical mental health counseling.
2. Develops measurable outcomes for clinical mental health counseling programs, interventions, and
3. treatments.
4. Analyzes and uses data to increase the effectiveness of clinical mental health counseling
5. interventions and programs.

DIAGNOSIS

1. Demonstrates appropriate use of diagnostic tools, including the current edition of the DSM, to describe the symptoms and clinical presentation of clients with mental and emotional impairments.
2. Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals.
3. Differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events.

VI. METHODS OF INSTRUCTION

The instructor will employ a variety of instructional methods to facilitate student learning including:

- Lecture / Discussion
- Case presentations with instructor and peer feedback
- Case studies and responses to structured exercises
- Use of technology and media including video-recordings, films, and PowerPoints
- Modeling
- Internet-based learning
- Reflective self-evaluation

VII. COURSE EVALUATION METHODS

Course Obj.	Assignment	Due Date	Points
2-6, 8-11	Attendance, Attitudes, Participation	8 Live Class Meetings: 1/23, 2/6, 2/20, 3/5, 3/26, 4/2, 4/16, 4/30	10 points each x 8 (80)
1-8, 10	Quizzes	7 Quizzes: 2/1, 2/15, 2/29, 3/14, 3/21, 4/11, 4/25	10 points each x 7 (70)
1-5, 7-11	DSM-5 Disorders & Assessment Interview Presentation	DSM-5 Disorder & Assess. Group 1: Feb. 20 Group 2: Mar. 5 Group 3: Mar 26 Group 4: Apr 2 Group 5 Apr 16 Group 6 & 7: Apr 30	(50)
1-5, 7-11	Written Biopsychosocial Diagnostic Report	Biopsychosocial Diagnostic Report Group 1: Mar 15 Group 2: Mar 29 Group 3: Apr 19	(50)

	Group 4: Apr 26 Group 5, 6, & 7: May 3 rd	
	Total	250

IMPORTANT: Late work is not accepted except in extreme circumstances and with prior permission of instructor. A grade of Incomplete (I or IP) will not be awarded except under extraordinary circumstances such as prolonged illness. If such circumstances arise, it is the student's responsibility to notify the instructor immediately.

A. Description of Assignments

1. Attendance, Attitudes, and Participation (10 points each class x 8)

Attendance and participation in classroom activities are essential in order for students to gain full benefit from this course. Students are expected to attend all class sessions and contribute to the class by presenting their ideas, reactions, questions and concerns in relation to class discussion. If you know that you are going to miss more than one class this semester, it is better to postpone registration until the next semester when you will be able to be present for all the classes.

Please note: In the event of a missed class, the course instructor expects students to notify the instructor of the reasons for missing the class in writing (e.g., email). Informing the instructor of an absence from class does not guarantee an "excused" absence. Additional documentation may be requested as the discretion of the course instructor.

Here are steps to access to Academic Video Online (Alexander Street)

- 1) Go to the library home page, click "Databases", and click "A", which will open all the databases whose title starts with A in a new tab. Academic Video Online is on the third on the list.
 - 2) When you click Academic Video Online, it will open in a new tab. You will see there are 68,401 videos that the Winona State University has access to through its subscription to the database.
 - 3) Type "Diagnostic Criteria" in the search box. If that does not work, include "Microtraining Associates"
 - 4) If 3) did not get you to the video, click funnel icon to filter your search. You will see 6 ways to narrow your search. Scroll down "Publisher" box to find "Microtraining Associates (521)", click that, and click "Mental Illnesses" in "Subject" box. It appears there are still search boxes, no videos, but you need to scroll down as the results are listed under these filter function boxes.
- You may be prompted to log into the library via your StarID and PW.
Hope you enjoy the reading and the video.

NOTE: Any issues related to viewing the videos, you must directly contact the library as they need to fix the proximity, subscription, or other technical issues.

Front Desk
507.457.5149

library@winona.edu

Digital Learning Commons
507.457.5240

DLC@winona.edu

2. Quizzes (10 points per quiz x 7)

Quizzes are due in **Saturday, by 11:59 PM** of odd number weeks except for week 10. They are located under the Assessments tab, Quizzes. Time is unlimited; however, each quiz must be taken in one-sitting. The numbers of question items are between 10 and 20 depending on how many chapters each quiz covers. All the items are from DSM-5, and books and lecture notes are allowed during the quiz.

3. Clinical Interviewing (Total 100 points)

This assignment has two parts: Written Diagnostic Report and Presentation of DSM-5 Disorders & Assessment Interview

3(A). Presentation of DSM 5 Disorders & Assessment Interview (50 points)

Students will work in a **pair** and choose a DSM-5 Disorder from the following DSM categories: (1)

Schizophrenia Spectrum and Other Psychotic Disorders, (2) Bipolar and Related Disorders, (3) Depressive Disorders, (4) Anxiety Disorders, (5) Obsessive-Compulsive and Related Disorders, (6) Trauma-and Stressor-Related Disorders, (7) Personality Disorders, and (8) Neurocognitive Disorders.

Students will first role-play (or play video-recorded) a 50-60 minutes mock clinical interview session that will (a) feature core characteristics of the selected disorder, (b) demonstrate clinical interviewing skills including mental status examination, Multicultural Formulation Interview, and (c) demonstrate relevant interviewing techniques from the class.

Students create a PowerPoint and must provide their classmates with a one-page handout highlighting the relevant / key ideas discussed. Each group will show the class 20 minutes of their clinical interview session and facilitate 20-30 minutes class presentation/discussion that addresses the following categories:

1. Identifying information Age, Development, Disability, Religion, Ethnicity, Social class, Sexual orientation, Indigenous heritage, National orientation, and Gender, as well as occupation, education, marital/partner status, and living area (urban, suburban, rural))
2. Chief complaint
3. Symptoms
4. Client history (e.g., substance use, childhood, education, employment, spirituality/religion, current stressors, coping, and support)
5. Strengths (individual, family, community, spiritual etc.)
6. Mental status examination
7. Diagnostic assessment

This assignment is intended to assist students with in-depth inquiry into a particular disorder, related treatment for the disorder, and to get students working together as “Mini Treatment Teams”. Students will be provided with a rubric for structuring the group presentation. All handouts and PowerPoint must be submitted to the corresponding assignment folders in D2L by the due date listed in the course schedule.

Please use the intake interview form located in D2L and submit the form with your report.

3(B). Written Diagnostic Report (50 points)

Working individually, students will complete a diagnostic assessment report with an emphasis on (a) incorporating the information provided by the client as well as any third parties relevant to the client's, (b) using diagnostic nomenclature from the DSM-5, (c) linking the diagnosis to a **theory driven** case conceptualization, and (d) providing a personal reflection about the assignment.

Theory driven case conceptualization: Students must incorporate at least five peer-reviewed journal articles (found in the university library database) in conceptualizing the client's presenting issue(s) and justifying your assessment. Students must identify development theories and stages that are relevant to the client and the case and incorporate and apply the theories and stages to conceptualize the case.

Details of report writing will be discussed in depth during class meetings and during online sessions. Samples of the written diagnostic report assignment may be presented in class but will not be posted on the course D2L. Written diagnostic reports must be submitted to the corresponding assignment folders in D2L by the due date listed in the course schedule.

The written report follows APA format.

Please use the case conceptualization template provided in class.

B. Grading for Course

Overall Grading Scale (Course):

NOTE: Due dates for all assignments are located in COURSE SCHEDULE

Percentage	Grade	Percentage	Grade	Percentage	Grade
92-100%	A	72-81%	C	Below 62%	F
82-91%	B	63-71%	D		

IMPORTANT: While assignment rubrics will be available, it is important to know that merely meeting the criteria of the rubric will not guarantee a grade A. In order to earn an A, students must do an A-quality work. Thorough work may reflect that students have done proof-reading, utilized the writing center in order to help one produce a graduate level writing in APA style, the library databases to supplement completion of the assignment (e.g., peer-reviewed journal articles, livestreaming educational media)

VIII. UNIVERSITY EXPECTATIONS & COURSE POLICIES

A. University Expectations and Resources

Diversity Statement: This is meant to be a safe, welcoming, and inclusive classroom environment for students of all races, ethnicities, sexual orientations, gender identities/variances, ages, religions, economic classes, and ability statuses. As such, you will be encouraged and challenged to use language and basic counseling techniques that are respectful, inclusive, representative and culturally appropriate.

Academic Integrity: Students are expected to practice professionalism and academic integrity in all assignments and class discussions. This includes but is not limited to treating other students and the professor respectfully, engaging in meaningful class discussions, thinking and writing critically and thoughtfully, creating original works, and citing all resources using APA format. Plagiarism will result in loss of credit for this course, and further consequences may result from the university system. The collegiate policy on plagiarism and cheating is outlined in the Student Handbook. It is your responsibility to be aware of this policy. You can also find it online at:

<http://www.winona.edu/sld/academicintegrity.asp>.

Electronic Device Notice: As a matter of courtesy to your classmates and the instructor, please turn off your beepers, cell phones, and any other electronic devices that make any noise.

Laptop/PDA Policy: Excluding students with a documented disability, the use of laptops and PDAs in class is prohibited without prior permission of the instructor.

Class Visitor Policy: Due to the clinical nature of this course in this curriculum, visitors of any age are not allowed without prior permission of the instructor.

E-mail Policy: You are assigned a university e-mail account that will be used by professors. Students should make every effort to get to know their account and check it regularly.

Accommodations: Students with documented disabilities who may need accommodations, who have any medical emergency information the instructor should know of, or who need special arrangements in the event of an evacuation, should make an appointment with the instructor as soon as possible, no later than the 1st week of the term. According to Section 504 of the Rehabilitation Act of 1973, students with disabilities have the right to receive necessary reasonable accommodations and support services to allow equal access at Winona State University. If you have a disability that requires accommodations, you are eligible for support through access services, found at

<http://www.winona.edu/accessservices/gettingstarted.asp>.

Commitment to Inclusive Excellence: WSU recognizes that our individual differences can deepen our understanding of one another and the world around us, rather than divide us. In this class, people of all ethnicities, genders and gender identities, religions, ages, sexual orientations, disabilities, socioeconomic backgrounds, regions, and nationalities are strongly encouraged to share their rich array of perspectives and experiences. If you feel your differences may in some way isolate you from WSU's community or if you have a need of any specific accommodations, please speak with the instructor early in the semester about your concerns and what we can do together to help you become an active and

engaged member of our class and community. Campus resources for students:

<http://www.winona.edu/diversity/estatement.asp>.

B. Graduate Student Resources

General Information: Academic calendar, forms and other procedures for graduate students can be found at <http://www.winona.edu/gradstudies/currentstudents.asp>

WSU-Rochester Student & Campus Services, UCR Room SS128, 285-7100,

(www.winona.edu/rochester/):

RCTC Counseling Center, UCR Room SS133; 285-7260 (www.rctc.edu/counseling_career_center/)

UCR Learning Center, UCR Room AT306; 285-7182

Counseling Services: Graduate school can be very stressful. Counselors are available in Winona and through partnership with RCTC on the UCR campus to help you with a wide range of difficulties.

WSU counselors in Winona are located in the Integrated Wellness Complex 222 and they can be reached at 457-5330. The RCTC Counseling Center is located in SS 133 and can be reached at 285-7260.

Other Support Services: WSU-Rochester Student & Campus Services Office and the WSU Inclusion and Diversity Office are dedicated to helping students of all races, ethnicities, economic backgrounds, nationalities, and sexual orientations. They offer tutoring and a wide range of other resources.

The WSU-R Student & Campus Services Office is located in Room SS128 on the UCR campus and can be reached at 285-7100. The WSU Inclusion & Diversity Office is located in Kryzsko Commons Room 122, and they can be reached at 457-5595. Information about the *KEAP Center*, dedicated to supporting diversity on campus, can be found here: <http://www.winona.edu/diversity/22.asp>.

UCR Learning Center – Rochester: For help with writing and the development of papers on the WSU-Rochester campus, contact personnel in AT306 or call 285-7182.

Writing Center - Winona: The Writing Center offers free, individualized instruction in all forms and disciplines during any stage of writing, reading, or research. Call 507.457.5505 for an appointment. Walk-ins also welcome.

- College writing can be a demanding mix of academic language, research knowledge, argument and personal expression. The friendly, talented staff of the WSU WritingCenter is waiting to help students discover solutions to their writing needs. Located in **Minne 348**, the Writing Center offers free, individualized instruction in all forms and disciplines during any stage of writing, reading or research.
- You can [make an appointment](#) for the WritingCenter on our homepage. The Writing Center prioritizes appointments, but walk-ins are welcome. Please call us at 457-5505 for more information.

Student Grievances: Students are encouraged to speak directly with instructors when concerns arise.

When issues cannot be resolved between the student and the instructor, students have the right to due process. Such complaint procedures are available online at:

<http://www.winona.edu/sld/studentgrievance.asp>

IX. COURSE SCHEDULE**5-8pm Thursdays: 1/23, 2/6, 2/20, 3/5, 3/26, 4/2, 4/16, 4/30**

Week	Topics/Activities	Readings & Videos	Assignments Due
Week 1 Jan 13 – Jan 17 Online Introduction via Zoom	Online Class Discussion Topics <ul style="list-style-type: none"> • Class Orientation (introduction, review syllabus, course overview) • Log in via Zoom https://minnstate.zoom.us/j/502348915 	Review syllabus Alexander Street Video Diagnostic Criteria (Microtraining Associates, 2015) Diagnostic and statistical manual of mental disorders (DSM) pp. 5 – 18 Introduction pp. 19 – 24 Use of the Manual p. 25 Cautionary Statement for Forensic Use of DSM-5 Morrison Introduction	
Week 2 Jan 20 – Jan 24 First Live Class Meeting Jan 23 (Thu)	In-Class Discussion Topics <ul style="list-style-type: none"> • Reading from week 1 • The structure of the DSM-5 <ul style="list-style-type: none"> ○ Use of the manual ○ Assessment Measures ○ Cultural Formulation • Clinical interviews • Deriving diagnoses & diagnostic assessment • Documentation & case note • Decide groups and diagnoses for group presentation 	DSM pp. 733 – 745 Assessment Measures pp. 749 – 759 Cultural Formulation DSM-5 Assessment, Differential Diagnosis and Documentation Process (53 mins) (Microtraining Associates, 2015)	
Week 3 Jan 27 – Jan 31 Online	Online Class Topics <ul style="list-style-type: none"> • Complete quiz • Schizophrenia Spectrum and Other Psychotic Disorders 	Alexander Street Video Schizophrenia & Other psychotic disorders (Microtraining Associates, 2016) Schizophrenia and Dissociative Disorders: Crash Course Psychology #32 https://www.youtube.com/watch?v=uxktavpRdzU&feature=emb_logo DSM	Quiz 1 due by 11:59pm Saturday Feb. 1st

		pp. 87 – 122 Schizophrenia Spectrum and Other Psychotic Disorders Morrison Ch 2 Schizophrenia Spectrum and Other Psychotic Disorders	
Week 4 Feb 3 – Feb 7 Second Live Class Meeting Feb 6 (Thu)	In-Class Discussion Topics <ul style="list-style-type: none"> • Reading from week 2 & 3 • Schizophrenia Spectrum and Other Psychotic Disorders • Bipolar and Related Disorders • Depressive Disorders • Anxiety Disorders • Announce presentation dates 	Alexander Street Videos Bipolar Disorders (Microtraining Associates, 2015) Depressive Disorders (Microtraining Associates, 2015) DSM pp. 123 – 154 Bipolar and Related Disorders pp. 155 – 180 Depressive Disorders Morrison Ch 3 Mood Disorders	
Week 5 Feb 10 – Feb 14 Online	Online Class Topics <ul style="list-style-type: none"> • Complete quiz • Bipolar and Related Disorders • Depressive Disorders • Anxiety Disorders 	Alexander Street Video Anxiety Disorders (Microtraining Associates, 2015) DSM pp. 189 – 232 Anxiety Disorder Morrison Ch 4 Anxiety Disorder	Quiz 2 due by 11:59pm Saturday Feb. 15th
Week 6 Feb 17 – Feb 21 Third Live Class Meeting Feb 20 (Thu)	In-Class Discussion Topics <ul style="list-style-type: none"> • Anxiety Disorder • Obsessive-Compulsive and Related Disorders • Presentation (Schizophrenia) 	Alexander Street Video Obsessive-Compulsive & Related Disorders (Microtraining Associates, 2015) Debunking the myths of OCD - Natascha M. Santos https://www.youtube.com/watch?time_continue=43&v=DhIRgwdDc-E&feature=emb_logo DSM pp. 235 – 264 Obsessive-Compulsive and Related Disorders Morrison	Group 1 Presentation PowerPoint & handout due by Wednesday, 19th

		Ch 5 Obsessive-Compulsive and Related Disorders	
<p>Week 7 Feb 24 – Feb 28</p> <p>Online</p>	<p>Online Class Topics</p> <ul style="list-style-type: none"> • Complete quiz • Obsessive-Compulsive and Related Disorders • Trauma- and Stressor-Related Disorders 	<p>Alexander Street Videos Trauma- and Stressor-Related Disorders (Microtraining Associates, 2015) Dissociative Disorders (Microtraining Associates, 2016)</p> <p>DSM pp. 265 – 290 Trauma- and Stressor-Related Disorders</p> <p>Morrison Ch 6 Trauma- and Stressor-Related Disorders</p> <p>DSM pp. 291 – 308 Dissociative Disorders Morrison Ch 7 Dissociative Disorders</p>	<p>Quiz 3 due by 11:59pm Saturday Feb. 29th</p>

<p>Week 8 Mar 2 – Mar 6</p> <p>Fourth Live Class Meeting Mar 5 (Thu)</p>	<p>In-Class Discussion Topics</p> <ul style="list-style-type: none"> • Trauma- and Stressor-Related Disorders • Dissociative Disorders • Personality Disorders • Paraphilic Disorders <p>• Group 1 Presentation (Bipolar)</p>	<p>Alexander Street Video Personality Disorders (Microtraining Associates, 2016) Personality Disorders: Crash Course Psychology #34 https://www.youtube.com/watch?v=4E1JiDFxFGk&feature=emb_logo</p> <p>DSM pp. 645 - 684 Morrison Ch 17 Personality Disorders</p> <p>DSM pp. 685 – 708 Morrison Ch 18 Paraphilic Disorders</p>	<p>Group 2 Presentation PowerPoint & handout due by Wednesday, March 4th</p>
<p>Week 9 Mar 9 – Mar 13</p> <p>Online</p>	<p>Online Class Topics</p> <ul style="list-style-type: none"> • Complete quiz • Personality Disorders • Paraphilic Disorders 	<p>Alexander Street Video Addictive Disorders (Microtraining Associate, 2016) Trauma and Addiction: Crash Course Psychology #31 https://www.youtube.com/watch?v=343ORgL3klc&feature=emb_logo</p> <p>DSM pp. 481 – 590 Substance Related and Addictive Disorders</p> <p>Morrison Ch 15 Substance Related and Addictive Disorders</p>	<p>Quiz 4 due by 11:59pm Saturday March 14th</p> <p>Diagnostic Report of Group 1 is due by 11:59pm, Sunday March 15th</p>
<p>Week 10 Mar 16 – Mar 20</p> <p>Online</p>	<p>Online Class Topics</p> <ul style="list-style-type: none"> • Complete quiz • Substance Related and Addictive Disorders • Somatic Symptom and Related Disorders • Feeding and Eating Disorders (Anorexia, Bulimia, Binge-Eating) 	<p>Alexander Street Videos Somatic Symptoms & Related Disorders (Microtraining Associate, 2016) Eating Disorders (Microtraining Associate, 2016)</p> <p>DSM (some skim, some full) pp. 309 – 328 Somatic Symptom and Related Disorders pp. 329 – 360 Feeding and Eating Disorders Read Anorexia, Bulimia, Binge-Eating. The rest (skim)</p> <p>Morrison (Skim)</p>	<p>Quiz 5 due by 11:59pm Saturday March 21st</p>

		Ch 8 Somatic Symptom and Related Disorders Ch 9 Feeding and Eating Disorders	
<p>Week 11 Mar 23 – Mar 27</p> <p>Fifth Live Class Meeting Mar 26 (Thu)</p>	<p>In-Class Discussion Topics</p> <ul style="list-style-type: none"> • Substance Related and Addictive Disorders • Somatic Symptom and Related Disorders • Feeding and Eating Disorders (Anorexia, Bulimia, Binge-Eating) • Group 2 Presentation (Depressive Disorder) 	<p>Alexander Street Video Alzheimer Disease & Related Disorders (National Educational Video, inc., 2016)</p> <p>DSM pp. 715 – 732 Cognitive Disorders</p> <p>Morrison Ch 16 Cognitive Disorders</p>	<p>Group 3 Presentation PowerPoint & handout due by Wednesday, March 25th</p> <p>Diagnostic Report of Group 2 is due by Sunday, March 29th</p>
<p>Week 12 Mar 30 – Apr 3</p> <p>Sixth Live Class Meeting Apr 2 (Thu)</p>	<p>In-Class Discussion Topics</p> <ul style="list-style-type: none"> • Cognitive Disorders • Neurodevelopmental Disorders • Group 3 Presentation (Anxiety) 	<p>Alexander Street Video Neurodevelopmental Disorders (Microtraining Associates, 2016)</p> <p>DSM pp. 31 – 86 Neurodevelopmental Disorders</p> <p>Morrison Ch 1 Neurodevelopmental Disorders</p>	<p>Group 4 Presentation PowerPoint & handout due by Wednesday, April 1st</p>
<p>Week 13 Apr 6 – Apr 10</p> <p>Online</p>	<p>Online Class Topics</p> <ul style="list-style-type: none"> • Complete quiz • Neurodevelopmental Disorders • Cognitive Disorders • Other Conditions that May Be A Focus of Clinical Attention 	<p>Alexander Street Video</p> <p>DSM pp. 715 – 732 Other Conditions that May Be A Focus of Clinical Attention</p> <p>Morrison Ch 19 Other Factors that May Need Clinical Attention</p>	<p>Quiz 6 due by 11:59pm Saturday, April 11th</p>
<p>Week 14 Apr 13 – Apr 17</p> <p>Seventh Live Class Meeting</p>	<p>In-Class Discussion Topics</p> <ul style="list-style-type: none"> • Other Conditions that May Be A Focus of Clinical Attention • Sexual Dysfunctions • Gender Dysphoria 	<p>Alexander Street Videos Sexual Dysfunction (Microtraining Associates, 2016) Gender Dysphoria (Microtraining Associates, 2016)</p> <p>DSM pp. 423 – 450 Sexual Dysfunctions (skim)</p>	<p>Group 5 Presentation PowerPoint & handout due by Wednesday, April 15th</p>

<p>Apr16</p>	<ul style="list-style-type: none"> • Group 4 Presentation (OCD) 	<p>pp. 451 – 468 Gender Dysphoria</p> <p>Morrison Ch 12 Sexual Dysfunction (skim) Ch 13 Gender Dysphoria</p>	<p>Diagnostic Report of Group 3 is due by 11:59pm Sunday April 19th</p>
<p>Week 15 Apr 20 – Apr 24</p> <p>Online</p>	<p>Online Class Topics</p> <ul style="list-style-type: none"> • Complete quiz • Elimination Disorders • Sleep-Wake Disorders 	<p>Alexander Street Video Sleep Disorders (Microtraining Associate, 2016)</p> <p>DSM pp. 355 – 360 Elimination Disorders (skim) pp. 361 – 422 Sleep-Wake Disorders</p> <p>Morrison Ch 10 Elimination Disorders (skim) Ch 11 Sleep-Wake Disorders</p>	<p>Quiz 7 due by 11:59pm Saturday April 25th</p> <p>Diagnostic Report of Group 4 is due by 11:59pm Sunday April 26th</p>
<p>Week 16 Apr 27 – May 1</p> <p>Eight Live Class Meeting Apr 30</p>	<ul style="list-style-type: none"> • Group 5 Presentation (Trauma- and Stressor-Related) • Group 6 (Personality) • Group 7 (Neurocognitive) 		<p>Groups 6 & 7 Presentation PowerPoint & handout due by Wednesday, April 29th</p> <p>All Diagnostic Reports are due by 11:59pm, May 3rd</p>

Appendix I: DSM-5 Initial Assessment Form

DIRECTIONS: Use this form when you are conducting clinical interview.

Case Presentation
Demographic information (sex, age, ethnic background, physical characteristics, disability, etc.):
Chief Complaint(s) / Presenting Problem(s): <i>(What is the client's cultural definition of the "Problem"?)</i>
History of Presenting Illness(s):
Past Psychiatric History:
Current Medication:
Medical History:
Developmental History:
Social History:
Family History:
Substance Abuse History:

Education / Employment History:
Risk Factors (Detail here any suicidal ideation, homicidal ideation, delusions, hallucinations, history of abuse or neglect):
Client's cultural factors affecting coping and help seeking:
Client's Successes, Strengths and Resources:
Mental Status Exam:
Diagnostic Formulation
DSM-5 Diagnosis:
Rationale for Diagnosis:
Additional Rule-Out Diagnosis:
Treatment Recommendation:

Appendix II

Mental Status Exam

1. **Mental Health Assessment** (Check all that apply)

Height: Short Medium Tall

Build: Thin Slim Medium Stocky Obese

Dress: Appropriate Meticulous Eccentric Disheveled

Facial Expression: Appropriate Sad Happy Angry Flat

Grooming: Appropriate Meticulous Dirty Poor Bizarre

Remarks/Comments:

2. **Observed Behaviors and Attitudes:**

<input type="checkbox"/> Appropriate/Acceptable	<input type="checkbox"/> Critical	<input type="checkbox"/> Suspicious	<input type="checkbox"/> Irritable
<input type="checkbox"/> Disinterested	<input type="checkbox"/> Guarded	<input type="checkbox"/> Evasive	<input type="checkbox"/> Defensive
<input type="checkbox"/> Manipulative	<input type="checkbox"/> Rejecting	<input type="checkbox"/> Frightened	<input type="checkbox"/> Impulsive
<input type="checkbox"/> Argumentative	<input type="checkbox"/> Silly	<input type="checkbox"/> Naïve	<input type="checkbox"/> Dramatic
<input type="checkbox"/> Aggressive	<input type="checkbox"/> Hostile	<input type="checkbox"/> Passive	<input type="checkbox"/> Dependent
<input type="checkbox"/> Overly cooperative	<input type="checkbox"/> Withdrawn		

Remarks/Comments:

3. **Observed Motor Activity:**

<input type="checkbox"/> Within normal limits	<input type="checkbox"/> Over activity	<input type="checkbox"/> Retardation	<input type="checkbox"/> Tremor
<input type="checkbox"/> Poor coordination	<input type="checkbox"/> Posturing	<input type="checkbox"/> Repetitive act	<input type="checkbox"/> Tics
<input type="checkbox"/> Echoproxic	<input type="checkbox"/> Grimacing	<input type="checkbox"/> Gestures	

Remarks/Comments:

GAIT: Shuffling Staggering Stiff Awkward Heavy No impairment apparent

Remarks/Comments:

4. **Mood & Affect** (Mood is subjective-client reported. Affect is observed):

Mood: Normal Elevated Dysphoric Euphoric Anxious Irritable
 Expansive

Affect: Broad Restricted Blunted Flat Inappropriate Appropriate

Remarks/Comments:

5. **Speech** (Refers to the manner of speech, not the content of speech):

Normal rate/volume Pressured Rambling Stammering
 Verbigeration Echolalia Slurred Loud
 Foreign accent Monotone Mutism Soft

Remarks/Comments:

6. **Thought Processes** (continuity of thought processes; associations between ideas):

Within normal limits Blocking Circumstantial Clanging
 Flight of ideas Tangential Indecision Perseveration
 Loose associations

Remarks/Comments:

7. **Thought Content:**

Within normal limits Phobias Obsessive ideas
 Feelings of unreality Hopelessness Worthlessness
 Somatic complaints Suspiciousness Magical thinking
 Feelings of persecution Guilt Illogical thinking

Remarks/Comments:

8. **Memory:**

Immediate memory: Good Fair Poor Unable to determine
Recent memory: Good Fair Poor Unable to determine
Remote memory: Good Fair Poor Unable to determine

Remarks/Comments:

9. **Orientation:** No Impairment

Not oriented to: Person Place Time

Remarks/Comments:

10. **Insight into Problems/Illness:**

Insight: Poor Fair Moderate Good Excellent

Motivation to participate in treatment: Poor Fair Moderate Good Excellent

Remarks/Comments:
